FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000075924 (7)

FARMINGTON ASSOC., INC.

Principal Place of Business

RIAA MODTUMEST 11TH STREET

Mailing Address

6144 NORTHWEST 11TH STREET

FILED Mar 14 1997 8:00am Secretary of State



Section Sect	SUNRISE FL 33	313	SUNRISE FL 33313-6116	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
Second Process Seco								eporl
SIGNATURE SIGNAPLY STATE STORY ADDRESS STATE	2. Principal Pl		2a. Mailing Address		Λ.	I '	Ap	plied For
SIGNATURE SIGNAPLY STATE STORY ADDRESS STATE	21 2300	w. Sample Kd	26 2300 W S	ampi	e Ka	65-0619706	No	it Applicable
Addition		#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	1 1 *=: -		
29 3 3 0 13 25 DOUBLE 1 29 3 20 1 3 0 DOUBLE 29 3 20 2 DO	City & State	ano Beach, FL						
THE LAW FIRM OF LAWRENCE J SPIEGEL CHRTD 343 ALMERNA AVENUE CORAL GABLES FL 33134 82 Stroot Address (P.O. Box Number is Not Acceptable) 11. Pursuant to the provisions of Sections 607-0509 and 607-1508, Norrical Statutor, the development of Sections 607-0509 and 607-1508, Norrical Statutor, the development of Sections 607-0509 as a statistical work named corporation submits this statement for the purpose of changing its registerod eigent. I am familiar with, and accept title obligations of, Section 607-0505, Florida Statutor, the development of Sections of Sections 607-0505, Florida Statutor, the development of Sections of Sections 607-0505, Florida Statutor, the development of Sections of Sections 607-0505, Florida Statutor, the development of Sections of Sections 607-0505, Florida Statutor, the development of Sections of Sections 607-0505, Florida Statutor, the development of Sections of Sections 607-0505, Florida Statutor, the development of Sections of Sections 607-0505, Florida Statutor, the development of Sections of Sections Statutor, and the Sections of Sections Statutor, and the Sections S	Ziρ .	Country	Zip		· 1	· -		199.032,
343 ALMERIA AVENUE CORAL GABLES FL 33134 62						10. Name and Address of New Re-	jistered Agent	
CORAL GABLES FL 33134 63 64 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607 05.00 and 607 1508. Novida Standars. The abbose number corporation submits this statement for the purpose of changing this registered agent, or both, in the State of Fancida Standars. The abbose number corporation's board of directors. I hereby accept the epipointment as registered agent. The familiar with, and accept the objections of Section 607 0505. Horizon 508 0507 0507 0505. Horizon 508 0507 0507 0505. Horizon 508 0507 0507 0507 0507 0507 0507 0507	THE LAW FIRM OF LAWRENCE J SPIEGEL CHRTD				1 Name			
Section Sect	343 ALMERIA AVENUE			82 Street Ad		dress (P.O. Box Number is Not Acceptab	le)	
11. Pursuant to the provisions of Sections 607.06.02 and 607.16.08. North 1607.06.02 and 607.16.08. North 1607.06.02 and 607.06.02 and 607.06.02 and 607.06.03	COR	AL GABLES FL 33134			of our radiood (1.0. box radiood b rat recopiants)			
Particularit to the provisions of Sections 607.0502 and 607.1508. Florida Statutos, the absore-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's beard of directors. Thereby accept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's beard of directors. Thereby accept the appointment as registered significant or the original and accept the objections of, Section 607.0505, Florida Statutos. SIGNATURE				8	3			
The purpose of Sections 607 0509 and 607 1508. Provided Statutes, the absorbanismed corporations but mits this statement for the purpose of changing list registered office or registered agent. I am familiar with, and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE Signature, Speed or printed ration of registered agent time dividing agent agent and accept the obligations of, Section 607 0505, Florida Statutes. SIGNATURE Signature, Speed or printed ration of registered agent and accept time obligations of speed or printed ration of registered agent and accept time dividing agent				8	4 City		85 Zip (Code
office or registerior agent, or both, in this State of Francia. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent and main with and accept the obligations of, Soction 607 0505, Frontial Statutions. Title	11 Pursuant t	a the provisions of Sections 607 0502	and 607 1508. Florida Statute	es the abo	Ve-named cor	rogration submits this statement for the p	urnose of changing ils	s registered
12	office or re	edistered agent, or both, in the State of	f Florida. Such change was a	authorized b	withe corpora	ation's board of directors. I hereby accep	I the appointment as	registered
19. ADDITIONS/CHANGES TO OFFICERS AND DIFFECTORS 12.	SIGNATURE	Stonature, typed or printed name of registered agent	and the it and cable (NOT)	Registered A	gent signature regu	uired when reinstanng)	DATE	
NAME STREET ADDRESS CITY-ST-2P SUNRISE FL 33313								S IN 12
STREET ADDRESS STATE SUNRISE FL 33313	TITLE	PSTD	Y DELETE	1.1 Tills F	P.	STD a	Change	Addition
STREET ADDRESS SUNRISE FL 33313 1.3 STREET ADDRESS 2.3 COLVEST - 2P Change Addition	NAME	RUBIN, ROBERT		1.2 NAMI	IR	unio Robert o		
14 CHY SI - 2IP 15 CHAP 15 CHA	STREET ADDRESS	6144 NORTHWEST 11TH STREE	T	1.3 STRE	(1 ADDRESS 2	300 in Sample Ko	ls Quite 20	02
NAME	CITY-ST-ZIP	SUNRISE FL 33313		1.4 CITY	ST-ZIP	ompano Beach,	FL 3307	ろ
2.3 SHREET ADDRESS 2.4 CHLY-ST-ZIP 2.4 CHLY-ST-ZIP 2.4 CHLY-ST-ZIP 2.4 CHLY-ST-ZIP 3.1 THLE	TITLE		DELETE	2.1 11316			Change	Addition
CITY-SI-ZIP	NAME			2.2 NAMI				
TITLE	STREET ADDRESS			2.3 STRE	ET ADDRESS			
NAME	CITY-ST-ZIP			2. 4 C(1)	- S1- 7IP			
STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 3.4 CITY-ST-ZIP ITILE DELEFTE 4.1 TITLE NAME 4.2 NAME CITY-ST-ZIP 4.4 CITY-ST-ZIP ITILE DELETE 5 TITLE NAME 5 NAME STREET ADDRESS 5 STREET ADDRESS CITY-ST-ZIP 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 61 TITLE NAME Change Addition NAME 62 NAME STREET ADDRESS CHY-ST-ZIP	TITLE		☐ DELETE	3.1 TITLE			Change	Addition
CITY_ST-ZIP	NAME			3.2 NAM				
TITLE DELETE 4.1 THE Change Addition NAME 4.2 NAME 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP Change Addition TITLE DELETE 5.1 THE Change Addition NAME 52 NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP COLTY-ST-ZIP COLTY-ST	STREET ADDRESS			3.3 S1RE	E1 ADORESS			1
NAME				·				
STREET ADDRESS 4.3 STREET ADDRESS CHY-ST-ZIP 4.4 CHY-ST-ZIP TITLE 5 THLE NAME 52 NAME STREET ADDRESS 5.3 STREET ADDRESS CHY-ST-ZIP 5.4 CHY-SI-ZIP TITLE DELETE 61 HILE NAME 62 NAME STREET ADDRESS 63 STREET ADDRESS	TITLE		□ DELETE	4.1 1111.6			Change	Addition
NAME	NAME			4. 2 NAM	E			
TITLE DELETE 5.1 III f Change Addition NAME 52 NAME	STREET ADDRESS				I			
NAME 52 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CRY-ST-ZIP TITLE DELETE 61 TRLE Change Addition NAME 62 NAME STREET ADDRESS 63 STREET ADDRESS 63 STREET ADDRESS				1				1 1 1 1 1 1 1 1 1 1
STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 C/RY-SI-ZIP TITLE DELETE 6.1 Title Change Addition NAME 6.2 NAME 6.3 STREET ADDRESS 6.3 STREET ADDRESS Change Addition	į						L Unange	L Addition
	1							
TITLE DELETE 61 THLE Change Addition NAME STREET ADDRESS 62 NAME 63 STREET ADDRESS 63 STREET ADDRESS					I			
NAME STREET ADDRESS 6.2 NAME 6.3 STREET ADDRESS			Decree				06	
STREET ADDRESS 63 STREET ADDRESS			LJ DELLTE				L Unange	☐ Addition
OTH OT TID	STREET ADDRESS			6.3 S1RE	ET ADDRESS			
64 CITY-ST-ZIP 64 CITY-ST-ZIP 14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the	CITY-ST-ZIP		- 50, 731	6.4 C/TY	-ST-7IP	440.07/09/5.77	Te ile i	41

information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, I lorida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.