

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P95000077800 (7)

1. Corporation Name

BUILDING & INVESTMENT HOLDING CORP.



Principal Place of Business

Mailing Address

1800 S. AUSTRALIAN AVE., #205  
WEST PALM BEACH FL 33409

1800 S. AUSTRALIAN AVE., #205  
WEST PALM BEACH FL 33409

3. Date Incorporated or Qualified

10/05/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 1700 PALM BEACH LAKES BL

26 1700 PALM BEACH LAKES BLVD

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 #580

27 #580

City & State

City & State

23 W. PALM BEACH, FL

28 W. PALM BEACH, FL

Zip

Country

Zip

Country

24 33401

25 USA

29 33401

30 USA

4. FEI Number

65-0676356

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PAINE, JEFFREY A ESQ.  
1800 S. AUSTRALIAN AVE., #205  
WEST PALM BEACH FL 33409

81 Name

MARK H. MIRKIN, ESQ.

82 Street Address (P.O. Box Number is Not Acceptable)

1700 PALM BEACH LAKES BLVD

83 #580

84 City

W. PALM BEACH

FL

85 Zip Code  
33401

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

*Mark H. Mirkin*

MARK H. MIRKIN

6/27/96

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE  
NAME D  
PACHLER, VICTOR  
STREET ADDRESS 1800 S. AUSTRALIAN AVE., #205  
CITY-ST-ZIP WEST PALM BEACH FL 33409

1.1 TITLE ☒ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS 1700 PALM BEACH LAKES BLVD.  
1.4 CITY-ST-ZIP W. PALM BEACH, FL 33401

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

2.1 TITLE ☐ Change ☒ Addition  
2.2 NAME P  
LILY OLM  
2.3 STREET ADDRESS 6811 GREENSTEAD ST.  
2.4 CITY-ST-ZIP FALLS CHURCH, VA 22042

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

3.1 TITLE ☐ Change ☒ Addition  
3.2 NAME S  
HEIKE PACHLER  
3.3 STREET ADDRESS 1700 PALM BEACH LAKES BLVD.  
3.4 CITY-ST-ZIP W. PALM BEACH, FL 33401

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the 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, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*V. Pachler*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

VICTOR PACHLER

6/27/96

561-687-4460

DATE

TELEPHONE NUMBER

CR2E034 (12/95)