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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

Apr 08 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT

P95000091525 (2)

SBS INVESTMENTS, INC.

Principal Place of Business Mailing Address 41 CAYMAN PLACE 41 CAYMAN PLACE PALM BEACH GARDENS FL 33418 PALM BEACH GARDENS FL 33418-8097 3. Date Incorporated or Qualified 3a. Date of Last Report 11/29/1995 04/19/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 21 65-0636130 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zic Country Ζıρ Country 8. This corporation has liability for intangible tax under s. 199.032, 24 25 30 Florida Statutes Yes No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name BRCMC, INC. C/O BLANK ROME COMISKY & MCCAULEY 82 Street Address (P.O. Box Number is Not Acceptable) 1401 FORUM WAY, SUITE 700 83 WEST PALM BEACH FL 33401 City 84 Zip Code 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. Fam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) **PSTD** TATLE DELETE 1.1 TITLE Change Addition SCHWARTZ, STEPHEN B NAME 1.2 NAME 41 CAYMAN PLACE STREET ADDRESS 1.3 STREET ADDRESS PALM BEACH GARDENS FL 33418 CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE TITLE Change 2.1 TITLE Addition NAME 22 NAME STREET ADDRESS 2.3 STREET ADDRESS CITY - \$1 - 2)P 2 4 CITY-ST-ZIP DELETE TITLE 3.1 TITLE Change ___ Addition NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY - S1 - Z1P 3.4. CITY - ST- ZIP DELETE TITLE 4.1 TITLE Change ☐ Addition NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS DITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETE 5.1 TITLE ☐ Change Addition 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIF 5.4 CITY - ST-ZIP DELETE TITLE 6.1 TITLE ☐ Change Addition NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADORESS** CITY - ST - ZIE 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 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 the captured by Chapter 607, Florida Statutes, and that my name

information indicated on this annual report or supplemental annual report is true and accurate I am an officer or director of the corporation or the receiver or trustee empowered to execute appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: STEPHEN B. SCHWARETZ