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1997 MAY -5 PM 12:44

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # P96000018903 (0)

1. Corporation Name
WATCH STATION, INC.



Principal Place of Business
255 ALHAMBRA CIRCLE
CORAL GABLES FL 33134

Mailing Address
255 ALHAMBRA CIRCLE
CORAL GABLES FL 33134-7411

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

g. Name and Address of Current Registered Agent

~~CORPORATION SERVICE COMPANY~~
~~1201 HAYS STREET~~
~~TALLAHASSEE FL 32301-2625~~

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 **WILLIAM BRYAN** has been 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 607.0504, Florida Statutes.

SIGNATURE **William Bryan** SPECIAL ASSISTANT SECRETARY

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

5/5/97

12. OFFICERS AND DIRECTORS

TITLE ~~D~~ CHADSEY, JACK B
NAME
STREET ADDRESS 255 ALHAMBRA CIRCLE
CITY-ST-ZIP CORAL GABLES FL 33134

TITLE ~~D~~ PETERSEN, LARRY G
NAME
STREET ADDRESS 255 ALHAMBRA CIRCLE
CITY-ST-ZIP CORAL GABLES FL 33134

TITLE ~~D~~ PITA, GEORGE L
NAME
STREET ADDRESS 255 ALHAMBRA CIRCLE
CITY-ST-ZIP CORAL GABLES FL 33134

TITLE ~~D~~
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ~~D~~
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ~~D~~
NAME
STREET ADDRESS
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 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 **Marlene M. Marban**

MARLENE M. MARBAN

3. Date Incorporated or Qualified
02/29/1996

3a. Date of Last Report

4. FEI Number

65-0654404

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

10. Name and Address of New Registered Agent

81 Name

CT CORPORATION SYSTEM

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

1200 SOUTH PINE ISLAND ROAD

83

84 City

PLANTATION

FL

85 Zip Code

33324

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P/D/CEO ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

P/D/CEO

V/T/D/CFO

S/D/AT

AS

MARBAN, MARLENE M.

255 ALHAMBRA CIRCLE

CORAL GABLES, FLORIDA 33134

V/D

BRUND, EDWARD L.

255 ALHAMBRA CIRCLE

CORAL GABLES, FLORIDA 33134

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****165.00 ****165.00

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