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Apr 14, 1999 8:00 am
Secretary of State

04-14-1999 90120 040 ***150.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000019417

1. Corporation Name

FIRST FINANCIAL INVESTMENT GROUP INCORPORATED

Principal Place of Business

Mailing Address

1918 HARRISON STREET #203
HOLLYWOOD FL 33020-5066

1918 HARRISON STREET #203
HOLLYWOOD FL 33020-5066

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

02/29/1996

4. FEI Number

65-0641541 65-0651541

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 owes the current year Intangible
Personal Property Tax.

☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip Country

Zip Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MOSKOL, NICHOLAS
1918 HARRISON STREET
SUITE 203
HOLLYWOOD FL 33020

81 Name

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

83

84 City

FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0602 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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

4/7/99

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE P ☐ DELETE
NAME MOSKOL, NICHOLAS
STREET ADDRESS 1079 TYLER ST
CITY-ST-ZIP HOLLYWOOD FL 33020

1.1 TITLE P ☐ Change ☐ Addition
1.2 NAME MOSKOL, NICHOLAS
1.3 STREET ADDRESS 1079 TYLER ST
1.4 CITY-ST-ZIP HOLLYWOOD, FL 33019

TITLE VP ☐ DELETE
NAME GALLAGHER, PATRICIA
STREET ADDRESS 1079 TYLER ST
CITY-ST-ZIP HOLLYWOOD FL 33019

2.1 TITLE VP ☐ Change ☐ Addition
2.2 NAME GALLAGHER-MOSKOL, PATRICIA
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

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 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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/7/99

Date

954-922-1154

Daytime Phone #

CR2E034 (11/98)