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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000038863 (2)

FILED Jan 27 1997 8:00am Secretary of State

| SIBDAK, CORP. Principal Place of Business Mailing Address 2711 SOUTH OCEAN DRIVE 2711 SOUTH OCEAN DRIVE HOLLYWOOD FL 33149 HOLLYWOOD FL 33019-2704 | | | | | | | | | |
|--|---|--|---|---|------------|---|--------------------|---------------------------------------|-------------------------------------|
| | | | | | ļ | 3. Date Incorporated or Qualified 04/18/1996 | 3a. Da | ite of Last P | teport |
| 2. Principal | Place of Business | 2a. Mailing Address | ····· | | | 4. 65-067-69 | | A | oplied For |
| Suite, Apt | * # .c.b. | Suite, Apt. #, etc. | | | | 63-061 01 | 16 | | ot Applicable |
| 22 Suite, Apr | i. #, this | 27 Stille, Apt. #, etc. | | | ļ | 5. Certificate of Status Desired | | | Additional equired |
| City & Sta | ale | City & State | | | | 6. Election Campaign Financing | | | May Be |
| 23 | - Total | 28 | Cour | | | Trust Fund Contribution | | · · · · · · · · · · · · · · · · · · · | to Fees |
| Zip 24 | Country 25 | Ζφ 29 | Cour | itry | | This corporation has liability for Florida Statutes | | tax under s ☐ No | . 199.032, |
| [24] | 9. Name and Address of Cu | | [30] | | | 10. Name and Address of New | | | |
| KU | RTZ, DAVID A | | | B1 Name | | | | | |
| | 17 SOUTH OCEAN DRIVE PH | W W | ŀ | 32 Street | Addres | s (P.O. Box Number is Not Accep | table) | | |
| HA | LLANDALE FL 33009 | | <u> </u> | B3 | | | | | |
| | | | 1 | 93 | | | | | |
| | | | | B4 City | | | FL | 85 Zip | Code |
| office or | registered agent, or both, in the S am familiar with, and accept the c | State of Florida. Such change was | s authorized | by the corp | poration | n's board of directors. I hereby acc | cept the app | ointment as | registered |
| agent. I SIGNATURE | Segilation, typed or proceed search of registers | st agent and life. Papp cable (NI | OTE Registered | | | when renstating) | £)ATE | | |
| SIGNATURE | Signature, apped on period name of a gradea OFFICE RS | d agent and ME Tappicable (NI SAND DIRECTORS | OTE Registered | Agent signature | e required | when ranslating) ADDITIONS/CHANGES TO OF | £)ATE | DIRECTOR | RS IN 12 |
| SIGNATURE 12. THEF | Segratus, typodici por cultoriar of registeri OFFICERS | st agent and life. Papp cable (NI | OTE Registered 13. | Agent signature | e required | when renstating) | £)ATE | | |
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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

anged, or on an attachment with an address.

SIGNATURE:

hut URE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR