

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

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PROFIT
CORPORATION
ANNUAL REPORT
1997



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

FILED

97 APR 23 PM 2:41

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # P96000040866 (1)

1. Corporation Name

PRIMARY CAPITAL RESOURCES CORP.



Principal Place of Business

6445 S.W. 107 STREET
MIAMI FL 33156

Mailing Address

6445 S.W. 107 STREET
MIAMI FL 33156-4051

2. Principal Place of Business

21 1001 Brickell Bay Dr

2a. Mailing Address

26 1001 Brickell Bay Dr

Suite, Apt. #, etc.

22 Suite 1200

Suite, Apt. #, etc.

27 Suite 1200

City & State

23 Miami, FL

City & State

28 Miami, FL

Zip

24 33131

Country

25 USA

Zip

29 33131

Country

30 USA

3. Date Incorporated or Qualified

05/10/1996

3a. Date of Last Report

4. FEI Number

65-0663801

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

PASTERNAK, MARSHALL R
1221 BRICKELL AVENUE
MIAMI FL 33131

10. Name and Address of New Registered Agent

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 607.0502 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

Signature (typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME PASTERNAK, MARSHALL R
STREET ADDRESS 6445 S.W. 107 STREET
CITY-STATE-ZIP MIAMI FL 33156

DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

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CITY-STATE-ZIP

DELETE

TITLE
NAME
STREET ADDRESS
CITY-STATE-ZIP

DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-STATE-ZIP

Change Addition

500002152465--2

2.1 TITLE D,P
2.2 NAME WEISS, BRADLEY S
2.3 STREET ADDRESS 1001 Brickell Bay Dr Suite 1200
2.4 CITY-STATE-ZIP Miami, FL 33131

Change Addition

3.1 TITLE VP,S
3.2 NAME CRAIG, EDWARD B
3.3 STREET ADDRESS 1001 Brickell Bay Dr Suite 1200
3.4 CITY-STATE-ZIP Miami, FL 33131

Change Addition

4.1 TITLE VP
4.2 NAME TESSIER, CYNTHIA A
4.3 STREET ADDRESS 1001 Brickell Bay Dr Suite 1200
4.4 CITY-STATE-ZIP Miami, FL 33131

Change Addition

5.1 TITLE T
5.2 NAME RODRIGUEZ, GUILLERMO
5.3 STREET ADDRESS 1001 Brickell Bay Dr Suite 1200
5.4 CITY-STATE-ZIP Miami, FL 33131

Change Addition

6.1 TITLE VP
6.2 NAME VAN VLIET, MATT
6.3 STREET ADDRESS 1001 BRICKELL BAY DR SUITE 1200
6.4 CITY-STATE-ZIP MIAMI FL 33131

Change Addition

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 607.0502, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Bradley S Weiss 04/16/97 (305) 577-3311

Date

Daytime Phone #

CR2E034 (9/96)



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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ACCOUNT NO. : 072100000032

REFERENCE : 340835 4303929

AUTHORIZATION

Patricia Pyzdek

COST LIMIT : \$ 165.00

ORDER DATE : April 23, 1997

ORDER TIME : 11:28 AM

ORDER NO. : 340835-015

CUSTOMER NO: 4303929

CUSTOMER: Ms. Jazmine Roman
Greenberg Traurig Hoffman
22nd Floor
1221 Brickell Avenue
Miami, FL 33131-3238

ANNUAL REPORT FILING

NAME: PRIMARY CAPITAL RESOURCES
CORP.

XX ANNUAL REPORT

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susana Romagosa

EXAMINER'S INITIALS:

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97 APR 23 PM 1:53
DIVISION OF CORPORATION

MWB
4-23-97