

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

FILED  
May 01 1997 8:00am  
Secretary of State

DOCUMENT # P96000044234 (8)

1. Corporation Name

BOCA BROTHERS ONE, INC.



Principal Place of Business

~~2424 N FEDERAL HWY~~  
~~SUITE 455~~  
BOCA RATON FL 33432

Mailing Address

~~2424 N FEDERAL HWY~~  
~~SUITE 455~~  
BOCA RATON FL 33431-7746

2. Principal Place of Business

21 900 N. FEDERAL HWY  
22 Suite Apt. #, etc. 460

23 City & State BOCA RATON, FL

24 Zip 33432 25 Country PALM BEACH

2a. Mailing Address

26 900 N. FEDERAL HWY  
27 Suite Apt. #, etc. 460

28 City & State BOCA RATON, FL

29 Zip 33432 30 Country PALM BEACH

3. Date Incorporated or Qualified

05/23/1996

3a. Date of Last Report

4. FEI Number

65-0727069

☒ 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

LARRY A. ROTHENBERG, P.A.  
~~2424 N FEDERAL HWY~~  
~~SUITE 455~~  
BOCA RATON FL 33431

10. Name and Address of New Registered Agent

81 Name

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

900 N. FEDERAL HWY

83

SUITE 460

84

City BOCA RATON

FL

85

Zip Code 33432

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 ☐ DELETE

NAME D ROTHENBERG, LARRY A

STREET ADDRESS ~~2424 N FEDERAL HWY, SUITE 455~~  
CITY-ST-ZIP BOCA RATON FL 33431

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS 900 N. FEDERAL HWY SUITE 460

1.4 CITY-ST-ZIP BOCA RATON, FL 33432

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 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 from an attachment with an address.

SIGNATURE LARRY A. ROTHENBERG, P.A.

1/24/97

561-393-3913

CR2E034 (9/96)