


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

FILED  
Apr 28 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	--

DOCUMENT # P96000044519 (2)

1. Corporation Name

PUR ACQUISITION COMPANY #1

Principal Place of Business

C/O RAHN PROPERTIES  
1512 E. BROWARD BLVD., #301  
FT. LAUDERDALE FL 33301

Mailing Address

C/O RAHN PROPERTIES  
1512 E. BROWARD BLVD., #301  
FT. LAUDERDALE FL 33301-2190

3. Date Incorporated or Qualified

05/24/1996

3a. Date of Last Report

2. Principal Place of Business

21 450 E. LAS OLAS BLVD.

Suite, Apt. #, etc.

22 SUITE 700

City & State

23 FT. LAUDERDALE, FL

Zip

24 33301

Country

25

2a. Mailing Address

26 450 E. LAS OLAS BLVD.

Suite, Apt. #, etc.

27 SUITE 700

City & State

28 FT. LAUDERDALE, FL

Zip

29 33301

Country

30

4. FEI Number

65-0678684

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

GARDINA, CAROL J  
C/O RAHN PROPERTIES  
1512 E. BROWARD BLVD., #301  
FT. LAUDERDALE FL 33301

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)  
450 E. LAS OLAS BLVD.

83

84 City SUITE 700

FT. LAUDERDALE, FL

85 Zip Code

33301

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 ☐ DELETE

NAME ANDERSON, JOHN H  
STREET ADDRESS C/O 1512 E. BROWARD BLVD., #301  
CITY-ST-ZIP FT. LAUDERDALE FL 33301

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

TITLE ☐ DELETE

NAME

STREET ADDRESS

CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P/D ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS 450 E. LAS OLAS BLVD., SUITE 700  
1.4 CITY-ST-ZIP FT. LAUDERDALE, FL 33301

2.1 TITLE V/D ☐ Change ☒ Addition

2.2 NAME

2.3 STREET ADDRESS ROBERTS, PETER H.  
450 EAST LAS OLAS BLVD., SUITE 700  
2.4 CITY-ST-ZIP FT. LAUDERDALE, FL 33301

3.1 TITLE VT ☐ Change ☒ Addition

3.2 NAME

3.3 STREET ADDRESS STIRK, ROBERT J.  
450 EAST LAS OLAS BLVD., SUITE 700  
3.4 CITY-ST-ZIP FT. LAUDERDALE, FL 33301

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, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JOHN H ANDERSON

Date

4-18-97

Daytime Phone #

954-524-5336

0258306

CR2E034 (9/96)