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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P96000047899 (5)

TRAYNOR STREET CORP.

FILED Apr 06 1998 8:00am Secretary of State



Principal Place of Business Mailing Address										
980 N. FEDERAL HIGHWAY. SUITE 302 980 N. FEDERAL H			AL HIGHWAY, S	WAY, SUITE 302						
BOCA RATON FL 33432			BOCA RATON FL 33432				DO 1/07 WESTS 11 THE 07 LOS			
						<u> </u>	DO NOT WRITE IN THIS SPACE			
						I	Date Incorporated or Qualified			
2. Principal Place of Business 2e. Mailing Address							05/31/1996 FEI Number		1	Applied Fax
21	idoe or pasinoss	<u>├</u> ─¬	26			* . '				Applied For Not Applicable
Suite, Apt.	#. etc.	·	Suite, Apt. #, etc.				65-0667835			Additional
22	-, -13		27			5.	Certificate of Status Desired		•	Required
City & Stat	0		City & State			6	Election Campaign Financing			0 May Be
23		28	28				Trust Fund Contribution			d to Fees
Zip	Country	Zip	1	Country		8.	This corporation owes or has p	aid the cur		
24	25	29	30				Personal Property Tax due Jun		Yes	□No
	9. Name and Address of Curre	ent Registered Agen	t			10.	Name and Address of New R	egistered	Agent	
TEDESCO, ROY S					Nar	me				
980 N. FEDERAL HIGHWAY, SUITE 302				82	82 Street Address (P.O. Box Number is Not Acceptable)					
BOCA RATON FL 33432					0,10	. 1) 2001/1000	Address (1.0. Dox Humber is Not Acceptable)			
				83						
				84	City	у			85 Zij	Code
44 Durauant	to the provisions of Soctions 607.05	00 and 607 1500 Flo	rido Ctatutos, th	20.000		and corporation	aubmite this statement for the	FL		the registered
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.		ND DIRECTORS		13.			DDITIONS/CHANGES TO OFF		DIRECTO	DRS IN 12
TITLE	P		DELETE	1.1 TITLE			•		Change	Addition
NAME	TEDESCO, ROY S			1.2 NAME						1
STREET ADDRESS	AAA AL EESEENI LIIGUNISII SUURE AAA				ADDRE	ESS				
CITY-ST-ZIP	BOCA RATON FL			1.4 CITY - S	T-ZIP					
TITLE	√ ST		DELETE	2.1 TITLE					Change	☐ Addition
NAME	LANDIS, DANIEL M			2.2 NAME						
STREET ADDRESS	AAA 14 COMMON LANGUAGUAGUAGUAGUAGUAGUAGUAGUAGUAGUAGUAGUAG			2.3 STREET	ADDRE	ESS				
CITY-ST-ZIP	BOCA RATON FL			2. 4 CITY-5	ST-ZIP					
TITLE			DELETE	3.1 TITLE					Change	Addition
NAME				3.2 NAME						
STREET ADDRESS				3.3 STREET	ADDRES	SS				
CITY-ST-ZIP				3.4. CITY-5	T-ZIP					
TITLE	-			4.1 TITLE					Change	Addition
NAME				4. 2 NAME						
STREET ADDRESS				4.3 STREET	ADDRES	SS				
CITY-ST-ZIP			▋.	4.4 CITY-S	T-ZIP					
TITLE			DELETE	5.1 TITLE					Change	Addition
NAME				5.2 NAME						
STREET ADDRESS				5.3 STREET	ADDRES	ess				
CITY-ST-ZIP			1	5.4 CITY - ST	T-ZIP					
TITLE				6.1 TITLE					Change	Addition
NAME			.	6.2 NAME						
STREET ADDRESS				6.3 STREET	ADDRES	SS				Ī
CITY-ST-ZIP	·			6.4 CITY-S	T- 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.