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

1998
DOCUMENT #

P96000053583 (6)

PROSS & CO., INC.

FILED Mar 20 1998 8:00am Secretary of State

Principal Plac	e of Business	Mailing Address								
4631 N.W. 31ST AVENUE #277 4631 N.W. 31ST AVENUE #277										
FORT LAUDERDALE FL 33309 F		FORT LAUDERDAL	FORT LAUDERDALE FL 33309			DO NOT WRITE IN THIS SPACE				
						3. Date Incorporated or Qua				
						06/24/1996				
2. Principal P	lace of Business	2a. Mailing Addres	S			4. FEI Number		A	oplied For	
21		26				<u>65-0687106</u>		N	ot Applicable	
Suite, Apt. #, etc.		Suite, Ap1. #, e	Suite, Apt. #, etc.			5. Certificate of Status Desire	ed 🗆		Additional	
22		27							equired	
City & State		 	City & State			6. Election Campaign Finance	· —		May Be	
23 Zip	Country	Zip	Cour	ninz		Trust Fund Contribution	<u> </u>		to Fees	
	25	29		nu y		8. This corporation owes or he Personal Property Tax due	•		angible 3 No	
24	9. Name and Address of Curr		30			10. Name and Address of N			<u> </u>	
PR	OSS, DANA I			В1	Name		-			
	15 N.W. 104TH WAY		ļ	_		(
	PARKLAND FL 33076			62	Street Ad	treet Address (P.O. Box Number is Not Acceptable)				
,			İ	83						
				_	-			last so		
				84	City		FI	_ 65 Zip	Code	
11. Pursuant	to the provisions of Sections 607.05	502 and 607.1508, Florida	Statutes, the at	ove	-named co	orporation submits this statement for ration's board of directors. I hereby	the purpose	of changing i	ts registered	
agent. I a	egistered agent, or both, in the Sta m fa miliar with, and accept the obl	igations of, Section 607.05	9 was authorized 505, Florida Stati	utes	the corpor i,	ration's board of directors, I hereby	accept the ap	pointment as	registered	
SIGNATURE										
	Signature, typed or printed name of registered a			Age	nt signature rec	quited when reinstating)	DATE			
12.	DIFICERS A	ND DIRECTORS	13.			ADDITIONS/CHANGES TO	OFFICERS AN	Change	Addition	
TITLE	PROSS, DANA I							Change	Audition	
NAME OVOCET ADDRESS	6245 N.W. 104TH WAY		1.2 NA		*000000					
STREET ADDRESS	PARKLAND FL 33076				ADDRESS					
CITY-\$T-ZIP TITLE	17/1/12/11/2/12/00/10	DELE	1.4 CIT TE 2.1 TIT	_	1-212			Change	Addition	
NAME		<u></u>	2.2 NA					onango		
STREET ADDRESS					ADDRESS		2 6			
CITY-ST-ZIP			2.401		- 1					
TITLE		DELE			****			Сһалде	Addition	
NAME			3.2 NA	ME						
STREET ADDRESS			3.3 ST	REET	address					
CITY-\$1-ZIP			3 4. €0	TY-S	T-ZiP				i	
TITLE		DELE						Change	Addition	
NAME			4. 2 NA	ME						
STREET ADDRESS			4.3 STF	REET	ADDRESS				ľ	
CITY-ST-ZIP			4.4 CIT	Y - \$7	r-21P					
TITLE		DELE						Change	Addition	
NAME			5.2 NA	ME					,	
STREET ADDRESS			5.3 STF	REET	ADDRESS				ļ	
CITY-ST-ZIP			5.4 CIT	<u>Y-S</u> T	r- ZIP					
TITLE		DELE	TE 6.1 TiT	LE				Change	Addition	
NAME			6.2 NAI	ME	1					
STREET ADDRESS			6.3 STF	REET	address					
CITY-ST-ZIP			6.4 CIT	Y-ST	- ZIP					
14. I hereby o	ertify that the information supplied	with this filing does not as	alify for the ever	mnti	ion stated i	in Section 119 07/3)(i). Florida Statu	tes I further o	ertify that the	information	

14. I hereby certify that the information supplied with this filling 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:

Dava Russ

3/12/19

954-771-4410