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FILED
May 14 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 # P96000054229 (5)

1. Corporation Name
CADD DIMENSIONS, INC.



Principal Place of Business

~~4800 N. FEDERAL HWY #D-102~~
BOCA RATON FL 33431

3200 N. MILITARY TRAIL
SUITE 201

Mailing Address

~~4800 N. FEDERAL HWY #D-102~~
BOCA RATON FL 33431

3200 N. MILITARY TRAIL
SUITE 201

2. Principal Place of Business

21 3200 N. MILITARY TRAIL
Suite, Apt. #, etc.

22 201

City & State

23 BOCA RATON, FL

Zip

24 33431

Country

25 USA

2a. Mailing Address

26 3200 N. MILITARY TRAIL
Suite, Apt. #, etc.

27 SUITE 201

City & State

28 BOCA RATON, FL

Zip

29 33431

Country

30 USA

3. Date Incorporated or Qualified
06/17/1996

3a. Date of Last Report

4. FEI Number

65-0672538

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

TAYLOR, ROBERT M
4800 N FEDERAL HWY #D-102
BOCA RATON FL 33431

10. Name and Address of New Registered Agent

81 Name

ROBERT M TAYLOR

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

3200 N. MILITARY TRAIL

83 SUITE 201

84 City

BOCA RATON

FL

85 Zip Code

33431

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 *Robert M. Taylor* ROBERT M. TAYLOR

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

(NOTE: Registered Agent signature required when reinstating)

4/29/97
DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME TAYLOR, ROBERT M
STREET ADDRESS 4800 N FEDERAL HWY #D-102
CITY-ST-ZIP BOCA RATON FL 33431

☐ DELETE

TITLE
NAME
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CITY-ST-ZIP

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CITY-ST-ZIP

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME ROBERT M. TAYLOR
1.3 STREET ADDRESS 3200 N. MILITARY TRAIL SUITE 201
1.4 CITY-ST-ZIP BOCA RATON FL 33431

☒ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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 *Robert M. Taylor* ROBERT M. TAYLOR 4/29/97 521 988 5344

CR2E034 (9/96)