

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

97 APR 30 AM 9:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DOCUMENT # P96000054684 (1)

1. Corporation Name
RCR INVESTMENTS, INC.

Principal Place of Business

208 S. ANDREWS AVE.
6TH FLOOR
FT. LAUDERDALE FL 33301

Mailing Address

208 S. ANDREWS AVE.
6TH FLOOR
FT. LAUDERDALE FL 33301-1064

3. Date Incorporated or Qualified

06/27/1996

3a. Date of Last Report

2. Principal Place of Business

21 450 EAST LAS OLAS BLVD.

Suite, Apt. #, etc.

22 SUITE 500

City & State

23 FT. LAUDERDALE FL

Zip

33301

Country

USA

2a. Mailing Address

26 450 EAST LAS OLAS BLVD.

Suite, Apt. #, etc.

27 SUITE 500

City & State

28 FT. LAUDERDALE FL

Zip

33301

Country

USA

4. FEI Number

65-0677031

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

AMERICAN INFORMATION SERVICES, INC.
ONE S.E. THIRD AVE.
27TH FLOOR
MIAMI FL 33131

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 Zip Code

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
NAME
STREET ADDRESS
CITY - ST - ZIP
PD
ROXITHON RICHARD C
450 E LAS OLAS BLVD 15 FLOOR
FORT LAUDERDALE FL 33301

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
T
BROWN CRIS V
450 E LAS OLAS BLVD 15 FLOOR
FORT LAUDERDALE FL 33301

☐ DELETE

TITLE
NAME
STREET ADDRESS
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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

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

3.1 TITLE
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23.2 NAME
23.3 STREET ADDRESS
23.4 CITY - ST - ZIP

24.1 TITLE
24.2 NAME
24.3 STREET ADDRESS
24.4 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)(j), 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

CRIS V BROWN

4/24/97

Date

954-627-5000

Daytime Phone #

0259488

CR2E034 (9/96)