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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

NAME

STREET ADDRESS

SIGNATURE

CITY-ST-ZIF



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000061322 (9)

SCHATZMAN & SCHATZMAN, P.A.

9200 S DADELAND BLVD SUITE 700 8200 S DADELAND BLVD SUITE 700 MIAMI FL 33156-2715 **MIAMI FL 33156** 3. Date Incorporated or Qualified 3a. Date of Last Report 07/22/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 Not Applicable 65-0684673 Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing Added to Fees **Trust Fund Contribution** 23 28 Country  $Z_{10}$ Country  $Z_{\rm IP}$ 8. This corporation has liability for intangible tax under s. 199.032, XX Yes No 30 Florida Statutes 24 25 29 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SCHATZMAN, JEFFREY N 9200 S DADELAND BLVD SUITE 700 82 Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33156** 83 84 City Zip Code 85 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 Signar inelityped or printed name of registered agent and otle if applicable. (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DECETE Addition TITLE 1.1 THLE ☐ Change D, President SCHATZMAN, JEFFREY N 1.2 NAME NAME Jeffrey N. Schatzman 9200 S DADELAND BLVD SUITE 700 STREET ADDRESS 1.3 STREET ADDRESS 9200 S. Dadeland Blvd. MIAM! FL 33156 1.4 CITY-ST-ZIP CHY-ST-ZIP Miami, FL 33156 DELETE X Addition 2.1 TITLE Change TITLE D, Secretary 2.2 NAME NAME Arnold D. Schatzman 2.3 STREET ADDRESS STREET ADDRESS 9200 S. Dadeland Blvd. C-1Y - S1 - ZIP 2. 4 CITY-\$1-ZiP Change DELETE Miami, FL Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 34. CITY-ST-ZIP ☐ DELETE 4 1 TITLE Change Addition TITLE 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 CITY-ST-ZIP CHY-ST-ZIP DELETE ☐ Change ☐ Addition TITLE 51 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-S1-ZIP CITY-ST-ZIP DELETE Change Addition 6.1 TITLE TITLE

6.2 NAME

SID TEFFREY OF SINTER CHAPEMAN, President

6.3 STREET ADDRESS

01/28/97

6.4 CITY - \$T - 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 results of the exemption of the corporation or the results of the execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if charmed on an address.

Daylime Phone #

(305) 670-6000

FILED

Jan 31 1997 8:00am

Secretary of State