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FILED
May 06 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 # P96000065415 (7)

1. Corporation Name

FRANDA PROPERTIES, INC.

Principal Place of Business

1111 LINCOLN ROAD #500
MIAMI BEACH FL 33139

Mailing Address

1111 LINCOLN ROAD #500
MIAMI BEACH FL 33139-2491

3. Date Incorporated or Qualified
08/05/1996

3a. Date of Last Report

4. FEI Number

☒ 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

2. Principal Place of Business

2a. Mailing Address

21 6893 SW 18th ST

26 6893 SW 18th ST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 SUITE F106

27 SUITE F106

City & State

City & State

23 BOCA RATON, FL

28 BOCA RATON, FL

Zip

Country

Zip

Country

24 33433

25 USA

29 33433

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DANIELS, NICHOLAS M ESO
1111 LINCOLN ROAD #500
MIAMI BEACH FL 33139

81 Name

FRANK NAVILIO

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

6893 SW 18th ST # F106

83

84 City

BOCA RATON

FL

85 Zip Code

33433

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)

03/25/97

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE
NAME NAVILIO, DANIEL
STREET ADDRESS 680 LINTON BOULEVARD #108
CITY-ST-ZIP DELRAY BEACH FL 33444

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS 6893 SW 18th ST # F106
1.4 CITY-ST-ZIP BOCA RATON, FL 33433

TITLE D ☐ DELETE
NAME NAVILIO, FRANK
STREET ADDRESS 680 LINTON BOULEVARD #108
CITY-ST-ZIP DELRAY BEACH FL 33444

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS 6893 SW 18th ST # F106
2.4 CITY-ST-ZIP BOCA RATON, FL 33433

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 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)(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: *

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/25/97

Date

(561) 347-6460

Daytime Phone

0190037

CR2E034 (9/96)