

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000067967 (5)

1. Corporation Name

ELDORADO RAVENSWOOD LIMITED, INC.

Principal Place of Business

5201 RAVENSWOOD ROAD
SUITE 103
FORT LAUDERDALE FL 33312

Mailing Address

5201 RAVENSWOOD ROAD
SUITE 103
FORT LAUDERDALE FL 33312

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/15/1996

3a. Date of Last Report

4. FET 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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

9. Name and Address of Current Registered Agent

SMITH, DEBORAH J
5201 RAVENSWOOD ROAD
SUITE 103
FORT LAUDERDALE FL 33312

81 Name

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

83

84 City

10. Name and Address of New Registered Agent

400002382674-2

-12/24/97--01084--001

****165.0BL ****165.00

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 PD ☐ DELETE

NAME SMITH, DEBORAH J
STREET ADDRESS 5201 RAVENSWOOD RD, #103
CITY-ST-ZIP FORT LAUDERDALE FL 33312

TITLE V ☐ DELETE

NAME SMITH, SAMANTHA W
STREET ADDRESS 5201 RAVENSWOOD RD, #103
CITY-ST-ZIP FORT LAUDERDALE FL 33312

TITLE ST ☐ DELETE

NAME SMITH, RICHARD N
STREET ADDRESS 5201 RAVENSWOOD RD, #103
CITY-ST-ZIP FORT LAUDERDALE FL 33312

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13.

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

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ Change ☐ Addition

☐ 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:

[Signature]

12/19/97

APPROVED
AND
FILED
pg. 1 of 2

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



CR2E034 (4/97)

PURITZ AND WEINTRAUB, LLP

Certified Public Accountants

1244 N. University Drive
Plantation, Florida 33322
Telephone (954) 370-2727
Fax (954) 370-2776

Eduardo S. Gonzalez C.P.A.
Lauren S. Puritz C.P.A.
Anthony Robledo C.P.A.
Raul M. Saenz C.P.A.
Robert J. Sax C.P.A.
Shabbir H. Songerwala C.P.A.
Cira H. Villazon C.P.A.
Tracy D. Weintraub C.P.A.

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Miami Office:
8180 N.W. 36th Street
Suite 100
Miami, Florida 33166
Telephone (305) 592-1411
Fax (305) 592-9699

June 6, 1997

Florida Department of State
Annual Report Filings
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

RE: Eldorado Ravenswood Limited, Inc.
Doc.#: P96000067967 Period: 1997

Dear Sir/Madam,

It has come to our attention that the above referenced taxpayer did not file the Florida Annual Report in a timely manner. The taxpayer changed his/her address during the latter part of 1996 and did not receive an original report from your office. We were not made aware of this fact until just recently.

Attached is the Florida Annual Report for 1997. We ask that you consider it filed in a timely manner, due to the circumstances mentioned above, and do not assess a late filing penalty. If you have any questions or require additional information, please do not hesitate to contact our office.

Very Truly Yours,



Puritz & Weintraub, CPA's
enclosures - (report & money order for \$165)
P&W;tfj