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

DOCUMENT # P96000078390 (7)

LAW OFFICES OF JAY D. FREEDMAN, ESQ, P.A.

Principal Place of Business Mailing Address

8000 SOUTH OCEAN BLVD. STE 1205

3000 SOUTH OCEAN BLVD. STE 1205

FILED Apr 28 1997 8:00am Secretary of State



| BOCA RATON | FL 83432 | BOCA RATON FL 33432-6 | BOCA RATON FL 33432-8351 | | | |
|--|------------------------------------|--|--------------------------|---|--|--------------------------------|
| | | | | | 3. Date incorporated or Qualified 09/20/1996 | 3a, Date of Last Report |
| 2. Principal F | Place of Business | 2a. Mailing Address | | ** * * * | 4. FEI Number | Applied For |
| 21 | | 26 | | | 65-0x97777 | Not Applicable |
| Sulte, Apt. #, etc. | | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired | \$8.75 Additional Fee Required |
| City & Stat | le | City & State | | | 6. Election Campaign Financing | \$5.00 May Be |
| 23 | | 28 | | | Trust Fund Contribution | ☐ Added to Fees |
| Zip | Country | Zip | Cou | ntry | 8. This corporation has liability for i | |
| 24 | 25 | 29 | 30 | | | Yes No |
| | 9. Name and Address of Cui | rent Registered Agent | | | 10. Name and Address of New Re | gistered Agent |
| Freedman, Jay D | | | | B1 Name | | |
| | 10 South Ocean B lvd. Ste | 1205 | | 82 Street Address (P.O. Box Number is Not Acceptable) | | |
| BO | CA RATON FL 33432 | | | | ` | |
| | | | | 63 | | |
| | | | | B4 City | | FL 85 Zip Code |
| 11. Pursuant | to the provisions of Sections 607. | 0502 and 607.1508. Florida Statu | tes, the al | pove-named o | corporation submits this statement for the o | |
| 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 (NOTE: Registered Agent signature required when reinstating) DATE DATE | | | | | | |
| 12. | | AND DIRECTORS | 13. | rigini dignatore i | ADDITIONS/CHANGES TO OFFIC | ERS AND DIRECTORS IN 12 |
| TITLE | D | DELETE | 1.1 1) | LF | | Change Addition |
| NAME | FREEDMAN, JAY D | _ | 1.2 N/ | į | | |
| STREET ADDRESS | 3000 SOUTH OCEAN BLVD |). STE 1205 | | REET ADDRESS | | |
| CITY-ST-ZIP | BOCA RATON FL 33432 | | | | | |
| TITLE | | DELETE | 21 11 | IY-ST-ZIP | | Change Addition |
| NAME | | | 22 NAME | | | Shango E Maddien |
| STREET ADDRESS | | | | REET ADDRESS | | |
| | | | | | | |
| CITY-ST-ZIP TITLE | | | 2.4 U | TY-ST-ZIP | | Change Addition |
| NAME | - | | 32 N/ | | | C. Orlange C. Zinamon |
| STREET ADDRESS | | | | | | |
| | | | | REET ADDRESS | | |
| CITY-ST-ZIP TITLE | | DELE1E | 3.4. U 4.1 TJ | 1Y-S1-ZIP | | Change Addition |
| | | La beten | | | | Change C Auditory |
| NAME ATREET ADDRESS | | | 4.2 N | | | ; |
| STREET ADDRESS | | | | REET ADDRESS | | |
| CITY-ST-ZIP | | ☐ DELETÉ | | TY-ST-ZIP | | Change |
| TITLE | | □ DetetE | 5.1 11 | | | Change Addition |
| NAME | | | 5.2 N/ | | | |
| STREET ADDRESS | | | | REET ADDRESS | | |
| CITY-ST-ZIP | | DELETE | | IY-ST-ZIP | · · · · · · · · · · · · · · · · · · · | Change Ladding |
| TITLE | | Las Velett | 6.1 TI | | | ☐ Change ☐ Addition |
| NAME | | | 62 N | | | |
| STREET ADDRESS | | | | REET ADDRESS | | |
| CITY-ST-ZIP | his and the short the state of the | Control of the state of the sta | | TY-ST-ZIP | | 17.0 |
| 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 | | | | | | |