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FILED

Apr 18 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 # P96000079612 (3)

1. Corporation Name

PROJECT RESOURCE CENTER, INC.

Principal Place of Business

8939 NW 1ST STREET  
CORAL SPRINGS FL 33071

Mailing Address

8939 NW 1ST STREET  
CORAL SPRINGS FL 33071-7513



3. Date Incorporated or Qualified  
09/25/1996

3a. Date of Last Report

4. FEI Number

65-0694242

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

21 7154 N. UNIVERSITY DR

Suite, Apt. #, etc.

22 313

City & State

23 TAMARAC FL

Zip

24 33321

Country

25 USA

2a. Mailing Address

26 7154 N. UNIVERSITY DR

Suite, Apt. #, etc.

27 313

City & State

28 TAMARAC FL

Zip

29 33321

Country

30 USA

9. Name and Address of Current Registered Agent

BAGG, HOWARD R  
8939 NW 1ST STREET  
CORAL SPRINGS FL 33071

10. Name and Address of New Registered Agent

81 Name

BAGG, HOWARD R

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

3652 CORAL SPRINGS DR

83

84 City

CORAL SPRINGS

FL

85 Zip Code

33065

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 D  
NAME BAGG, HOWARD R  
STREET ADDRESS 8939 NW 1ST STREET  
CITY-ST-ZIP CORAL SPRINGS FL 33071

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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CITY-ST-ZIP

☐ DELETE

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D  
1.2 NAME BAGG, HOWARD R  
1.3 STREET ADDRESS 3652 CORAL SPRINGS DR  
1.4 CITY-ST-ZIP CORAL SPRINGS FL 33065

☒ Change

☐ Addition

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

☐ Change

☐ Addition

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

☐ Change

☐ Addition

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

☐ Change

☐ Addition

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

☐ Change

☐ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

☐ 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:

*Howard R. Bagg*

HOWARD R. BAGG

4/12/97

954 462 4820

CR2E034 (9/96)