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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000085538 (2)

B'S COURTHOUSE PARKING, INC.

Principal Place of Business	
945 CE & CTDEET	

TITLE NAME

STREET ADORESS

Mailing Address

P.O. BOX 21732

FT LAUDERDALE FL 33333-1732

FILED May 27 1998 8:00am Secretary of State



FT LAUDERDALE FL DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 10/14/1996 APPLIED FOR 65-0836366 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Regulred City & State City & State 6, Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Zip Country $Z_{(\Gamma)}$ Country 8. This corporation owes or has paid the current year Intangible Yes 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 61 Name PARISE, DONALD 1165 NW 134 AVE 82 Street Address (P.O. Box Number is Not Acceptable) SUNRISE FL 3323 83 84 City Zip Code 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 profiled name of registered agent and lifte if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE Change Addition TITLE 1.1 TITLE NISONGER, DAVID B NAME 1.2 NAME 1524 15 LANE STREET ADDRESS 1.3 STREET ADDRESS LAKE WORTH FL CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 21 TIBLE PARISE, DONALD 2.2 NAME 1165 NW 134 AVE STREET ADDRESS 2.3 STREET ADDRESS **SUNRISE FL** 2. 4 CITY - ST - ZIP CITY-ST-ZIP Change DELETE 3.1 TITLE Addition NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY-ST-ZIP CITY-ST-ZIP DELETE ☐ Change ■ Addition TITLE **4.1 TITLE** NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition 5.1 TITLE TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP Change ☐ Addition DELETE

CITY-ST-ZIP 14. Thereby 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 received 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 aj hent with an address

6.4 CITY - ST- ZIP

6.1 THLE

6.2 NAME 6.3 STREET ADDRESS