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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P96000090571 (6)

O'BRIEN - NEWMAN, INC.

Principal Place of Business

SIGNATURE:

Mailing Address

1300 NORTH FEDERAL HIGHWAY-#166

4300 NORTH FEDERAL HIGHWAY #106

FILED Apr 23 1997 8:00am Secretary of State

216-573-4170

| 11881 | | | | Lunian |
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| DUUR TIATURE | ' | DOON INTOITIE SOURTON | ' | | |
|--------------------------------------|--|---|------------------------------|--|---|
| | | | : | Date Incorporated or Qualified 10/31/1996 | Sa. Date of Last Report |
| <u></u> | ace of Business | 2a. Mailing Address | 0 | 4. FEI Number | Applied For |
| 1 6231 N | orth Federal Highway | | e Koad | 68-0714041 | Not Applicable |
| Suite, Apt. # | r, etc. | Suite, Apt. #, etc. 27 Suite 140 |) | 5. Certificate of Status Desired | S8.75 Additional Fee Regulred |
| City & State | | City & State | Δ1.°- | 6. Election Campaign Financing | \$5.00 May Be |
| 3 Ft. Lau | iderdale FL | 28 Cleveland | Country | Trust Fund Contribution | Added to Fees |
| ^z 3330 | S Country | 29 4H131 30 | ¬ · | | Yes 12 No |
| | g, Name and Address of Current | Registered Agent | | 10. Name and Address of New F | legistered Agent |
| O'BF | RIEN, ANDREW W | | 81 Name | | in the first of the second of |
| A 4 1300 |) North Federal Highway 🗲 | Ю6 | 82 Street | Address (P.O. Box Numb <u>er</u> is Not Accepta | able) |
| BOC | A RATON FL 33432 | | | 231 North Federal | Highway |
| | | | 63 | | |
| • • | |) | 84 City | | las Zip Code |
| | | | | + Lauderdale | FL 85 Zip Code 8 |
| 11. Pursuant to | o the provisions of Sections 607.0502 | and 607 1508, Florida Statutes, | the above-named | corporation submits this statement for the poration's board of directors. I hereby acc | purpose of changing its registered |
| onice or re agent. I an | n familiar with and accept the obliga | Hons of, Section 607.0505, Florid | da Statutes. | JORACOTTS DOGIO OF GIRECTORS. FRIENDLY BOOK | opt the appointment as registered |
| SIGNATURE Z | // Jew | | | | 2-5-97 |
| SIGNATURE 2 | Signature, typed or printed name of registered agen | t and title if applicable. [NOTE: F | Registered Agent signature | required when reinstating) | DATE |
| 12. | OFFICERS AND | | 13. | ADDITIONS/CHANGES TO OFF | ICERS AND DIRECTORS IN 12 |
| TITLE | D | ☐ DELETE | 1.1 TITLE | | Change Addition |
| NAME | O'BRIEN, ANDREW W | | 1.2 NAME | 6231 North Federal Hi Ft. Lauderdale FL | iahway |
| STREET ADDRESS | -1300 NORTH FEDERAL HIGHN | /AY ≢106 | 1.3 STREET ADDRESS | Et. Lauderdale FL | ³ 33808 |
| CITY-ST-ZIP | BOGA RATON FL 33432 | | 1.4 City - St - ZiP | | |
| TITLE | D | ☐ DELETE | 2.1 TITLE | | ☐ Change ☐ Addition |
| NAME | NEWMAN, GENE W | | 22 NAME | 6231 North Federal 1 Ft. Lauderdale FL | diohway |
| STREET ADDRESS | 1300 NORTH FEDERAL HIGHW | /AY # 106 | 23 STREET ADDRESS | Si Laudardale El | 33308 |
| CITY-ST-ZIP | BOGA RATON FL 98482 | | 2.4 CITY-ST-ZIP | tt. Editatione ic | 20300 |
| TITLE | | ☐ DELETE | 3.1 TITLE | | Change Addition |
| NAME | | | 3.2 HAME | | |
| STREET ADDRESS | | | 3 3 STREET ADDRESS | | |
| CITY-ST-ZIP | | | 3.4. CITY-ST-ZIP | | |
| TITLE | | ☐ DELETE | 4.1 TITLE | | ☐ Change ☐ Addition |
| NAME | | | 4. 2 NAME | | |
| STREET ADDRESS | | | 4.3 STREET ADDRESS | | |
| | | | 4.4 CITY-ST-ZIP | 1, 445 | A |
| CITY-ST-ZIP TITLE | | DELETE | 5.1 TITLE | | Change Addition |
| NAME | | | 5.2 NAME | 1 | Λ |
| STREET ADDRESS | | | 5.3 STREET ADDRESS | | (h 111 1 2 1 2 1 |
| | | | | en the second of | 714011 |
| CITY-ST-ZIP TITLE | | ☐ DELETE | 5.4 CITY-ST-ZIP 6.1 TITLE | | Change Addition |
| | | - Appen | 5.2 NAME | 60000219 | |
| NAME | | | | 60000216 -05/21/97011 ***330.00 | |
| STREET ADDRESS | | | 6.3 STREET ADDRESS | ***35U UU | ou du |
| CITY-ST-ZIP | by codify that the information as also | d with the filing dass not a latter | 6.4 CITY-ST-ZP | etatori in Contino 110 07/3Vil Florida Stat | ides I further certify that the |
| informatio l am an o appears i | on indicated on this annual report or sufficer or director of the conformation or in Block 12 or Block 13 in changed | upplemental annual report is tru the receiver or trustee empowe on an attachment with an addr | red to execute this | d that my signature shall have the same k report as required by Chapter 607, Florid | agal effect as if made under oath; the Statutes; and that my name |