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 # P96000092910 (4)

PARKWAY CENTER ACQUISITION CORP.

FILED Apr 29 1997 8:00am Secretary of State



Principal Place of Business 7940 GLADES ROAD BOCA RATON FL 33434		7940 GLADES	Mailing Address 7940 GLADES ROAD BOCA RATON FL 33434-4114			(3881-1881 118 18110 BUILL SELL SELL SELL SELL SELL SELL SELL S				
·						3. Date Incorporated or Qualified 11/13/1996	3a. Dat	le of Last	Report	7
2. Principal P	lace of Business	2a. Mailing Ad	2a. Mailing Address			4 FFI Number			Applied For	1
21		26				52-201560	3		Vot Applicable]
Sulte, Apt. #, etc.		Suito, Apt.	Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional	1
22		27				6 , 05, 1110 at 0 5, 04 at 0 5		Fee F	Required	_
City & State	е	├ - ┐ '	City & State			6. Election Campaign Financing				
Zip Country		28	Zip Country			Trust Fund Contribution	<u> </u>	Added to Fees		
Zip	— <u> </u>			٦ .	f	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No			s. 199.032,	
24		25 29 Name and Address of Current Registered Agent		[30]		Florida Statutes				-
ROS	SENBAUM, RICHARD A			81	Name	10.				1
	EAST LAS OLAS BLVD									
	TE 500		82 Street Ad			ddress (P.O. Box Number is Not Acceptable)				
	RT LAUDERDALE FL 33301			83	·					1
()	TO BE TO GOOD									
				84	City		FL	85 Zir	Code	
11. Pursuant	to the provisions of Sections 607.0	0502 and 607,1508, FI	orida Statutes,	the abov	e-named cor	poration submits this statement for the p	urpose of	changing	its registered	
office or re	egistaled agent, or both, in the St m familier with and accept the ob	ate of Florida. Such ch ligations of Section 6	iange was auti 07.0505. Floric	horized by la Statute	y the corpora s.	poration submits this statement for the p ation's board of directors. I hereby accep	I the appo	intment a	is registered	
SIGNATURE	WITH THE									
SIGNATORE	Signature, lyrind or printed name of registered	agent and title if applicable	(NOTE: R	legistered Ag	ont signature requ	ired when reinstating)	DATE			┨.
12.		AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFIC				<u>آ</u>
TITLE	0	LJ	DELETE	1.1 TITLE			ļ	Change	Addition	9
NAME	BOINIS, PETER P			1.2 NAME						2
STREET ADDRESS	7940 GLADES ROAD		1.3 S		ADDRESS					Ĭμ
CITY-ST-ZIP	BOCA RATON FL 33434		DELEVE:	1.4 CITY-1	ST - 24P				1 4 4 4 5 C = -	-Įģ
TITLE			DELETE	2.1 31TLE	ļ			L Change	Addition	1
NAME				2.2 NAME						
STREET ADDRESS	,			2.3 STREET						1
CITY-ST-ZIP TITLE			DELETE	2. 4 CITY- 3.1 TITLE	S1-ZIP			Change	Addition	-
			OLLLIC						רבן אטטווטוו	
NAME CIRCULADORES	li			3.2 NAME	TADODECC					
STREET ADDRESS				3.3 STREE 3.4 CITY-	TADDRESS					
CITY-ST-ZIP TITLE			DELETE	4.1 TITLE	51·2IF			Change	Addition	-
NAME		ب		4. 2 NAME			,			
STREET ADDRESS					I ADDRESS					
CITY-ST-ZIP				4.4 CITY-5						
TITLE			DELETE	5.1 TITLE	31-511			Change	Addition	1
NAME		· ·		5.2 NAME	j		•			Ì
STREET ADDRESS					I ADDRESS					
CITY-ST-ZIP				5.4 CITY - !						
TITLE			DELETE	6.1 71TLE		· · · · · · · · · · · · · · · · · · ·		☐ Change	Addition	1
NAME				6.2 NAME						
STREET ADDRESS				ľ	1 ADDRESS					
CITY-ST-ZIP				6.4 CITY - 3		**				
										→

14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this agrital 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 corp ration 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 in changed for on an attachment with an address.