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FILED
Feb 02 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000099582 (4)

1. Corporation Name

UNIVERSITY SCHOOL DADS' CLUB, INC.

Principal Place of Business

4000 HOLLYWOOD BLVD., SUITE 715
HOLLYWOOD FL 33021

Mailing Address

4000 HOLLYWOOD BLVD., SUITE 715
HOLLYWOOD FL 33021

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/10/1996

2. Principal Place of Business

21 10001 W OAKLAND PARK BLVD

Suite, Apt. #, etc.

22 202

City & State

23 SUNRISE FL

Zip

24 33351

Country

25 USA

2a. Mailing Address

26 10001 W OAKLAND PARK BLVD

Suite, Apt. #, etc.

27 202

City & State

28 SUNRISE FL

Zip

29 33351

Country

30 USA

4. FEI Number

65-0717739

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

WOLKOWITZ, HOWARD
4000 HOLLYWOOD BLVD., #715
HOLLYWOOD FL 33021

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85 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 printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D
NAME WOLKOWITZ, HOWARD
STREET ADDRESS 4000 HOLLYWOOD BLVD., SUITE 715
CITY-ST-ZIP HOLLYWOOD FL 33021 ☐ DELETE

TITLE D
NAME DALBERY, DEAN
STREET ADDRESS 9830 S.W. 2ND ST.
CITY-ST-ZIP PLANTATION FL 33324 ☐ DELETE

TITLE D
NAME GOLDSTEIN, DAVID
STREET ADDRESS 5815 S.W. 87TH TERR.
CITY-ST-ZIP COOPER CITY FL 33328 ☐ DELETE

TITLE D
NAME FRIEDMAN, RON
STREET ADDRESS 10001 W. OAKLAND PARK BLVD., #202
CITY-ST-ZIP SUNRISE FL 33351 ☐ DELETE

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

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

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

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

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

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

14. I 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:

1/6/98 94 749 9811

CR2E034 (10/97)