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

**PROFIT** CORPORATION ANNUAL REPORT

1998

STREET ADDRESS

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham . . .

Secretary of State DIVISION OF CORPORATIONS

P97000017696 (0) DOCUMENT #

T.T. CLAY INCORPORATED

Principal Place of Business Mailing Address ONE PARK PLACE ONE PARK PLACE 621 NORTHWEST 53RD STREET. SUITE 450 BOCA RATON FL 33487 621 NORTHWEST 53RD STREET. SUITE 450 BOCA RATON FL 33487 DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified <u>02/25/1997</u> 2. Principal Place of Business 2a, Mailing Address Applied For 21 26 Not Applicable Suite, Apt. #. etc. Suite, Apt #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Added to Fees 28 Trust Fund Contribution Zip Country Country This corporation owes or has paid the current year Intangible Yes 24 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 Name WARLEN, NEESA B ONE PARK PLACE R2 Street Address (P.O. Box Number is Not Acceptable) 621 NORTHWEST 53RD STREET, SUITE 450 В3 **BOCA RATON FL 33487 B4** 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 printed name of registered agent aird title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. TITLE D DELETE 1.1 TITLE Change Addition NAME WEISSMAN, MICHAEL 1.2 NAME STREET ADDRESS ONE PARK PLACE, 621 NW 53RD ST., SUITE 450 1.3 STREET ADDRESS **BOCA RATON FL 33487** CITY-ST-ZIP 1.4 CITY - ST - ZIP 1000025035**2**fhange DELETE Addition TITLE 21 TITLE NAME WEISSMAN, RICHARD S 2.2 NAME -04/28/98--01095--011 STREET ADDRESS ONE PARK PLACE, 621 NW 53RD ST., SUITE 450 2.3 STREET ADDRESS \*\*\* 150.00 CITY-ST-ZIP BOCA RATON FL 33487 2. 4 City - St - 2iP □ DELETE 3.1 TITLE Change Addition TITLE GARY RUDINZED St. #450 NAME 3.2 NAME Boca Rator FL STREET ADORESS 3.3 STREET ADDRESS 33487 CITY-ST-ZIP 3.4. CITY-S1-ZIP DELETE ☐ Change TITLE 4.1 TITLE MARK SCHILLER NAME 4 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-7IP 4.4 CITY - ST- ZIP Change DELETE TITLE 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS BOCA ROTON FL 334B7 CITY-ST-ZIP 5.4 CITY - ST - ZIP **Addition** DELETE Change TITLE 6.1 TITLE NAME 6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

**FILED** Apr 28 1998 8:00am Secretary of State



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 of 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 artifless. (A) 17094-627/2

ROUTON FL

2/16/98