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PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000095212 (1)

COUSINS ORECK OF PLANTATION, INC.

Principal Place of Business Mailing Address 2887 BANYAN BLVD. CIR. 2887 BANYAN BLVD. CIR. **BOCA RATON FL 33431 BOCA RATON FL 33431** DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified <u> 11/06/1997</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 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 28 Trust Fund Contribution Added to Fees 23 Country Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 3Q. 24 30 g. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 AVERBOOK, CHARLES J 2887 BANYAN BLVD. CIR. Street Address (P.O. Box Number is Not Acceptable) **BOCA RATON FL 33431** 83 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 (NOTE, Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and little if applicable ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. D. President, Treasurer DELETE Change TITLE 1.1 TITLE TABOR, MARK NAME 1.2 NAME R2E034 STREET ADDRESS 2607 NW 48TH ST. 1.3 STREET ADDRESS **BOCA RATON FL 33434** CITY-ST-ZIP 1.4 CITY-ST-ZIP ___ Addition DELETE Change C.E.O. , Secretary TITLE 2.1 TITLE AVERBOOK, CHARLES J NAME 2.2 NAME 2887 BANYAN BLVD. CIR. 2.3 STREET ADDRESS STREET ADDRESS **BOCA RATON FL 33431** CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE 3.1 TITLE Change TITLE NAME 3.2 NAME 3.3 STREET ADDRESS STREET ADDRESS CITY - ST - ZIP 3.4. CITY - ST-ZIP DELETE 4.1 TITLE Change Addition TITLE

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 Statules. 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 Statules; and that my name appears in

6.4 CITY-ST-ZIP

4. 2 NAME

5.2 NAME

6.1 TITLE

62 NAME 6.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP TITLE

NAME

CITY-ST-ZIP

DELETE

DELETE

FILED

Jan 16 1998 8:00am

Secretary of State

0326890

Change

Change

Addition

☐ Addition