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

FILED
Feb 13 1998 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1998

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

DOCUMENT # **S65426** **(6)**

1. Corporation Name
BOCA MANAGEMENT CORPORATION

Principal Place of Business
10718 KIRKALDY LANE
BOCA RATON FL 33498
US

Mailing Address
10718 KIRKALDY LANE
BOCA RATON FL 33498
US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24 | County 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29 | Country 30

3. Date Incorporated or Qualified
07/05/1991

4. FEI Number
65-0280380
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$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
LICHTMAN, JONATHAN J.
100 NE THIRD AVE
STE 1100
FT LAUDERDALE FL 33301

10. Name and Address of New Registered Agent
81 Name: JONATHAN J. LICHTMAN, P.A.
82 Street Address (P.O. Box Number is Not Acceptable)
SANCTUARY CENTRE
83 4800 N. FEDERAL HIGHWAY, SUITE D-100
84 City: BOCA RATON FL 85 Zip Code: 33431

11. Pursuant to the provisions of Section 607.0505, 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. The above 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: JON LICHTMAN, PRESIDENT 2/3/98
(If changing Registered Agent, signature required where indicated) DATE

12. OFFICER AND/OR DIRECTOR

TITLE	DVST	☐ DELETE
NAME	LICHTMAN, JONATHAN J.	
STREET ADDRESS	10718 KIRKALDY LANE	
CITY-ST-ZIP	BOCA RATON FL 33498	
TITLE	DP	☐ DELETE
NAME	LICHTMAN, BETSY	
STREET ADDRESS	23458 TORRE CIR.	
CITY-ST-ZIP	BOCA RATON FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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

11 TITLE	D, P, S, T	☒ Change	☐ Addition
12 NAME			
13 STREET ADDRESS			
14 CITY-ST-ZIP			
21 TITLE	D, VP	☒ Change	☐ Addition
22 NAME			
23 STREET ADDRESS	10718 KIRKALDY LANE		
24 CITY-ST-ZIP	BOCA RATON, FL 33498		
31 TITLE		☐ Change	☐ Addition
32 NAME			
33 STREET ADDRESS			
34 CITY-ST-ZIP			
41 TITLE		☐ Change	☐ Addition
42 NAME			
43 STREET ADDRESS			
44 CITY-ST-ZIP			
51 TITLE		☐ Change	☐ Addition
52 NAME			
53 STREET ADDRESS			
54 CITY-ST-ZIP			
61 TITLE		☐ Change	☐ Addition
62 NAME			
63 STREET ADDRESS			
64 CITY-ST-ZIP			

CR2E034 (10/97)

14. I hereby certify that the corporation named in this report is filing for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental requests to be kept confidential 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 added.

SIGNATURE: JON LICHTMAN PRESIDENT 2/4/98 (561)443-4113