

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **S81600** (6)

1. Corporation Name

PIPWOOD INVESTMENTS, INC.



Principal Place of Business

**701 BRICKELL AVENUE
SUITE 1800 (RFH)
MIAMI FL 33131**

Mailing Address

**801 BRICKELL AVE
STE. 1301
MIAMI FL 33131
US**

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

24 Country

2a. Mailing Address

26 **701 Brickell Avenue**

27 Suite, Apt. #, etc.
Suite 850

28 City & State

Miami, Florida

29 Zip

33131

30 Country

USA

3. Date Incorporated or Qualified
09/20/1991

3a. Date of Last Report
04/27/1995

4. FEI Number

65-0291642

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 has liability for intangible tax under s. 199.032,
Florida Statutes. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

**SULLIVAN, JOHN S
801 BRICKELL AVENUE
SUITE 1301
MIAMI FL 33131**

10. Name and Address of New Registered Agent

81 Name

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

**701 Brickell Avenue
Suite 850**

84 City

Miami, Florida

FL

85 Zip Code

33131

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 individual agent or director

Signature typed or printed name of registered agent

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☐ DELETE
NAME **SULLIVAN, JOHN S**
STREET ADDRESS **801 BRICKELL AVENUE, SUITE 1301**
CITY-STATE-ZIP **MIAMI FL 33131**

TITLE **S** ☐ DELETE
NAME **SULLIVAN, JOHN S**
STREET ADDRESS **801 BRICKELL AVENUE, SUITE 1301**
CITY-STATE-ZIP **MIAMI FL 33131**

TITLE **VP** ☐ DELETE
NAME **SULLIVAN, JOHN S**
STREET ADDRESS **801 BRICKELL AVE. STE 1301**
CITY-STATE-ZIP **MIAMI FL**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

13.

5.1 TITLE

12 NAME

13 STREET ADDRESS

14 CITY-STATE-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

**701 Brickell Avenue. Suite 850
Miami, Florida 33131**

☐ Change ☐ Addition

**701 Brickell Avenue. Suite 850
Miami, Florida 33131**

☐ Change ☐ Addition

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Miami, Florida 33131**

☐ Change ☐ Addition

**700001816847
-05/10/96--01040--004**

*****5000.00**

☐ Change ☐ Addition

5-1-96

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: **John S. Sullivan/ Director**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/26/96

(305) 381-8340