

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

PROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # **S91501** (4)

1. Corporation Name

**THE SHOWROOM AT THE QUAY, INC.**

Principal Place of Business

**1535 SE 17TH STREET  
STE 115  
FT. LAUDERDALE FL 33316  
US**

Mailing Address

**1535 SE 17TH STREET  
STE 115  
FT. LAUDERDALE FL 33316  
US**



2. Principal Place of Business

2a. Mailing Address

21 **920 E LAS OLAS BLVD**

26 **920 E LAS OLAS BLVD**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23 **FT LAUDERDALE FL**

28 **FT LAUDERDALE FL**

Zip

Zip

Country

Country

24 **33301**

25 **USA**

29 **33301**

30 **USA**

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified  
**10/31/1991**

3a. Date of Last Report  
**03/28/1995**

4. FEI Number  
**65-0294200**

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

10. Name and Address of New Registered Agent

**CAYIA, EDWARD DE R. P.A.  
432 NE 3RD AVENUE  
FT. LAUDERDALE FL 33301**

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 of person named as registered agent in the application

Print Name of Registered Agent (Separate sheet required when first time listed)

DATE

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE

**D  
ALEXANDER, WILLIAM B.**

NAME

**1535 SE 17TH ST., #115**

STREET ADDRESS

**FT. LAUDERDALE FL**

CITY - ST - ZIP

TITLE

**D  
BOLGER, CHRISTOPHER J.**

NAME

**1535 SE 17TH STREET, STE. 115**

STREET ADDRESS

**FT. LAUDERDALE FL**

CITY - ST - ZIP

TITLE

**D  
BIENVENU, WAYNE J.**

NAME

**1535 SE 17TH ST., #115**

STREET ADDRESS

**FT. LAUDERDALE FL**

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

TITLE

☐ DELETE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☒ Change ☐ Addition

11 TITLE

**D  
ALEXANDER, WILLIAM B**

12 NAME

13 STREET ADDRESS

**920 E LAS OLAS BLVD**

14 CITY - ST - ZIP

**FT LAUDERDALE FL 33301**

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY - ST - ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

05/09/96

DATE

CLERK'S PHONE #

CR2E034 (12/95)