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

PROFIT
CORPORATION •
ANNUAL REPORT



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

CR2E034 (12/95)

6

1996

DOCUMENT # 1. Corporation Name

SIGNATURE:

V11542

(0)

## FALCON MANAGEMENT AND MARKETING, INC.

Principal Place of Business  ONE PARK PLACE STE 160 BOCA RATON FL 33487 US		Mailing Address	Mailing Address					
		621 NW 53RD STREET STE 160 ROCA RATON EL 334R7						
		_				3. Date incorporated or Qualified	3a. Date of Las	•
A 50 1 fb/		1.62 14.85. 24.55.				<b>02/04/1992</b> 4. FEL Number	04/25/	
2. Principa: Pla 21	ace of Business	28. Mailing Address	2a. Mailing Address			65-0313183		Applied For Not Applicable
Suite, Apt.	#. etc	Suite, Apt. #, etc.	<u></u>				\$8	75 Additional
22		27	normal transfer of the second		5. Certificate of Status Desired		ee Required	
City & State	)	City & State	City & State		6. Election Campaign Financing	\$5	5.00 May Be	
23	and the commentation and a comment of the comment	28				Trust Fund Contribution Added to Fees		
Ζη: <b>24</b>	Country 25	Σιρ [ <b>29</b> ]	Country 30			8. This corporation has liability for in Florida Statutes Yes		ers 199.032,
24	[30]	10. Name and Address of New Registered Agent			······································			
			81	i	Name	The state of the s		
RUSSELL, GORDON .			82	,	Street Addre	Address (P.O. Box Number is Not Acceptable)		
	FINANCIAL CENTER			]	Cooc radio	areas (* 10. Box Norman is Not Acceptable)		
	ORTH FEDERAL HIGHWAY/SUI	TE 300	83	3				
BOCA R	ATON FL 33432		84	1	City	and the second of the second or seco	<b></b> 85	Zıp Code
					-		FL	
or register	to the provisions of Sections 607.056 red agent, or both, in the State of Fic th, and accept the obligations of, Se	irida. Such change was authorized	s, the above- d by the con	-na poi	arned corpora ration's board	ction submits this statement for the purp d of directors. I hereby accept the appo	oose of changing intment as registe	its registered office pred agent. I am
SIGNATURE	Signatore, typed or pointed name of regiserion age	onteractific mapping action (NON)	: Hogistered Ago	ent i	agnature required	when re-ristating)	DA1(	
12.	OF LICERS AND DIRECTORS		13.	13.		ADDITIONS/CHANGES TO OFFI	CERS AND DIRE	CTORS IN 12
TITLE	PD	[]] DELETE	1. 1 TITLE	1.2 NAME		•	Char	nge 🔲 Addition
NAME	RUSSELL, GORDON		1.2 NAME					
STREET ADDRESS	1515 NORTH FEDERAL HW	Ύ.	1.3 STREET ADDR					
CITY-ST-ZIP TITLE	BOCA RATON FL	[] DELETE	1.4 CITY - 2. 1 TULE	****	- 216		Char	nge 🗍 Addition
NAME.			2.2 NAME				L.J 0/16/	igo [_] /taomor
STREET ADORESS			2.3 STREE		ADDRESS			
CITY-ST-ZIP	į		2.4 CITY -					
TITLE		DECFIE		3. 1 Title			Chai	nge []] Addition
NAME			3.2 NAME					
STREET ADORESS			3.3 STREE	H17	ADDRESS			
CITY-ST-ZIF		France Control	3.4 CITY -		- ZIP	<b>6000017</b> £ -04/16/96011	32726	Final Address.
TITLE		[] DEFEJE	4. 1 TITLE				24U14 <sup>©hai</sup>	ige [] Addition
NAME			4.2 NAME		A PODDE CE	***200.00		
STREET ADORESS			4.3 STREE		Ĭ,			
CITY-ST-ZIP TITLE	FIDELETE		4.4 C(TY - ST - Z(P) 5. 1 TITLE		· BP	ALL MANAGEMENT AND	[□ Chai	nge [1] Addition
NAME		Fred Street	5.2 NAMÉ		j		L 3/10/	bull results
STREET ADDRESS			5.3 STREE		ADDRESS			
CITY-ST-2IF			5.4 CITY -					
THE		DELETE	6. 1 TITLE				Chai	nga 🔲 Addition
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREE	.1 A	ADDRESS			4-16-6
CHY-SI-ZIP		### \## : 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	6.4 C·TY -					
certify that	f the information indicated on this ar	inual report or supplemental annu: poration on the receiver or trustee	al report is tr empowered	rue	e and accurat	or the exemption stated in Section 119, e and that my signature shall have the report as required by Chapter 607, Fig.	same legal effect.	as if made under