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FILED
Mar 19 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # V24346

(1)

1. Corporation Name

WOODBURN HOLDING CORP. I

Principal Place of Business

Mailing Address

C/O WILLIAM D. HORVITZ
1 EAST BROWARD BLVD., #1101
FT. LAUDERDALE FL 33301

C/O WILLIAM D. HORVITZ
1 EAST BROWARD BLVD., #1101
FT. LAUDERDALE FL 33301-4842



2. Principal Place of Business

21

Suite, Apt. #, etc.

LAS OLAS CENTRE

450 EAST LAS OLAS BOULEVARD, #900
FORT LAUDERDALE, FLORIDA 33301

Zip

Country

24

25

2a. Mailing Address

26

LAS OLAS CENTRE

450 EAST LAS OLAS BOULEVARD, #900
FORT LAUDERDALE, FLORIDA 33301

City & State

28

Zip

Country

29

30

9. Name and Address of Current Registered Agent

PASTERNAK, MARSHALL R.
1221 BRICKELL AVENUE
MIAMI FL 33131

3. Date Incorporated or Qualified

03/27/1992

3a. Date of Last Report

03/07/1996

4. FEI Number

65-0351510

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing

☐ \$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

81

Name

HORVITZ, WILLIAM D

82

Street Address (Do not include P.O. Box number, if not applicable)

LAS OLAS CENTRE
450 EAST LAS OLAS BOULEVARD, #900
FORT LAUDERDALE, FLORIDA 33301

83

City

84

State

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, typed or printed name of registered agent, and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE

DPST

☐ DELETE

NAME

HORVITZ, WILLIAM D.

STREET ADDRESS

1 EAST BROWARD BLVD.

CITY-ST-ZIP

FT. LAUDERDALE FL

TITLE

V

☐ DELETE

NAME

HORVITZ, DAVID W

STREET ADDRESS

1 E BROWARD BLVD #1101

CITY-ST-ZIP

FT LAUDERDALE FL

TITLE

V

☐ DELETE

NAME

LUKE, DOUGLAS S

STREET ADDRESS

1 E BROWARD BLVD #1101

CITY-ST-ZIP

FT LAUDERDALE 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

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

LAS OLAS CENTRE

☐ Change ☐ Addition

1.2 NAME

450 EAST LAS OLAS BOULEVARD, #900

1.3 STREET ADDRESS

FORT LAUDERDALE, FLORIDA 33301

1.4 CITY-ST-ZIP

2.1 TITLE

LAS OLAS CENTRE

☐ Change ☐ Addition

2.2 NAME

450 EAST LAS OLAS BOULEVARD, #900

2.3 STREET ADDRESS

FORT LAUDERDALE, FLORIDA 33301

2.4 CITY-ST-ZIP

3.1 TITLE

LAS OLAS CENTRE

☐ Change ☐ Addition

3.2 NAME

450 EAST LAS OLAS BOULEVARD, #900

3.3 STREET ADDRESS

FORT LAUDERDALE, FLORIDA 33301

3.4 CITY-ST-ZIP

4.1 TITLE

☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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

CR2E034 (9/96)