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PROFIT CORPORATION ANNUAL REPORT



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

1996 DOCLIMENT #

141

PANAN	MEDIA SQUARE REALTY	\	•						
Principal Place	e of Business	Mailing Address				1001 G 1010 14040 10401 14000			
6699 N. FEDERAL HWY. BOCA RATON FL 33487			6699 N. FEDERAL HWY. BOCA RATON FL 33487						
9. Principal Pi	lace of Business	20 Mailley Adalys				Date Incorporated or Qualific 04/16/1992		ate of Last 04/26/19	
21	ace or business	2a. Mailing Address	i			4. FET Number			Applied For
Suite, Apt.	#, etc.	Suite, Apt. #, etc	.c.			65-0393401		<u> </u>	Not Applicab 5 Additional
22		27				5. Certificate of Status Desired			• Required
City & State	Ð	City & State				6. Election Campaign Financing			00 May Be
23 Zip	Country	28				Trust Fund Contribution		Add	ed to Fees
24 ZIP	Country 25	Zip 29	Country	У		8. This corporation has liability		tax under s	s 199.032,
	9. Name and Address of Cu		<u> 30 </u>			Florida Statutes 10. Name and Address of Ne	Yes 👿 No		
			81	Name	e	TO. Maine and Address of Ne	w Registered	Agent	· · · · · · · · · · · · · · · · · · ·
FRIEDSC	ON, MICHAEL R ESQ								
	FEDERAL HWY		82	Street	t Addres	s (P.O. Box Number is Not Accep	itable)		
	ATON FL 33487		83	 					
			84	City					
				1 Oilv			E1	1 1	ip Code
familiar wit	to the provisions of Sections 607, ed agent, or both, in the State of th, and accept the obligations of,	0502 and 607.1508, Florida St. Florida. Such change was auth Section 607.0505, Florida Stati	tatutes, the above-		corporati s board	ion submits this statement for the of directors. I hereby accept the a	purpose of chappointment a	nanging its is registered	registered offi d agent. I am
familiar wit SIGNATURE	th, and accept the obligations of, Signature, typod or printed name of registered OFFICERS	Section 607.0505, Florida State (agent and the Papalicane). S AND DIRECTORS	tatutes, the above-	named operation	5 OOATG	or airectors. Thereby accept the a	DATE:	s registere	d agent, I am
familiar wit SIGNATURE 12. TIILE	th, and accept the obligations of, Signal we, typod or printed name of registered OFFICERS	Section 607,0505, Florida State	tatutes, the above- horized by the corp tutes.	named operation	5 OOATG	or directors. Thereby accept the a	DATE	s registere	d agent, I am
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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

407-991-0074 Dayline Promot