FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 420926

(8)

ATLANTIC GENERAL CORPORATION

FILED					
Feb 11 1997 8:00am					
Secretary of State					

Change

Addition

Principal Place of Business		Mailing Address		7 (981)(9/8/4 7/8/1 89/14))	the tiften bres gefeir ditter mittet ditter diefer meger enter	
6500 SW 11 ST MIAMI FL 33156 US		8500 SW 111 ST MAIMI FL 33156-4007 US			•	
				3. Date incorporated or 03/12/1973	Oualified 3a. Date of Last Report 02/12/1996	
	acc of Business	2a, Mailing Address		4. FEI Number	Applied For	
21		26		59-1445591	59-1445591 Not Applicable	
Suite, Apt. #, etc		Suite, Apt. #, etc.		5. Certificate of Status D	esired S8.75 Additional Fee Required	
City & State		F	City & State		nancing \$5.00 May Be	
23		28			Trust Fund Contribution Added to Fees	
Zip	Country	Zip	Country	This corporation has I Florida Statutes	ability for intangible tax under s. 199.032,	
24	25 29 30 Florida Statutes					
DID	GLEY, HERB B		81 Nan			
	SUET, HEND D O SW 111 ST			(0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.0.		
MIAMI FL 33156			82 Stre	et Address (P.O. Box Number is No	Acceptable)	
, , , , , , , , , , , , , , , , , , ,			83			
			84 City	<u> </u>	85 Zip Code	
			84 City		FL 85 Zip Code	
11. Prirsuant 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.	Sejecture Typed or protect can a of registered ager	nr and title if applicable (NO)	E- Registered Agent signs	ture required when reinstating)	DATE	
12.	OFFICERS AND		13.		TO OFFICERS AND DIRECTORS IN 12	
TITLE	PTD	DELETE	1.1 TITLE		Change Addition	
NAME	RIDGLEY,HERB B		1.2 NAME	ì		
STREET ADORESS	6500 SW 111 ST		1.3 STREET ADDRES	s		
CITY-ST-7iP	MIAMI FL		1.4 CITY-ST-ZIP			
TIFLE	SD	DELETE	2.1 TITLE		Change Addition	
NAME	MOSELEY, LOUISE	•	2.2 NAME	MOSELEY, LOUI	SE	
STREET ADORESS	6500 SW 111 ST		2.3 STREET ADDRES	S 521 EAST 21 S	TREET	
CITY-ST-ZIP	MIAMI FL		2. 4 CITY - ST - ZIP	HIALEAY, FLOR	IDA 33013	
TITLE	1	DELETE	3.1 TITLE		Change Addition	
NAME			3.2 NAME			
STREET ADORESS			3.3 STREET ADDRES	is		
CITY-ST ZIP		DELETE	3.4. CITY-ST-ZIP		Change Addition	
NAME		FT DETECT	4.1 HILE 4.2 NAME		Change E Auditori	
STREET ADDRESS			4.2 NAME 4.3 STREET ADDRES	ee l		
CITY- ST- ZIP			4.3 STREET ADDRES	, , , , , , , , , , , , , , , , , , ,		
TITLE		DELETE	5.1 TITLE		Change Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRES	ss	•	

6.4 CITY-ST-ZIP 14. Lob hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3Xi), 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 chartied, or on an attachment with an address.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.1 TITLE

6.2 NAME

DELETE

SIGNATURE:

CITY - ST - ZIP

STREET ADDRESS

CITY-ST-ZiP

TIGUE NAMÉ