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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # J04786

(6)

Principal Place of Business * KEVIN F. RICHARDSON 1551 FORUM PL. STE. 300-C W. PALM BEACH FL 33401	Mailing Address Mailing Address KEVIN F. RICHA 1551 FORUM PL I W. PALM BEACH F	IRDSON STE. 300-C	
W. PALM BEACH PL 30401	THE PERCENT F	L 33401-2307	3. Date Incorporated or Qualified 3a. Date of Last Report 03/19/1986 04/09/1996
2. Principal Place of Business	2a. Mailing Addres	SS	4. FEI Number Applied Fo
21	26		59-2752522 Not Applica
Suite, Apt. #, etc.	Suite, Apt. #, e	ilo.	5. Certificate of Status Desired \$8.75 Additiona
22 Cit & State	City & State		Fee Hequired
City & State	28		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip Country	Zip	Country	8. This corporation has liability for intengible tax under s. 199.032
24 25	29	30	Florida Statutes Yes No
9. Name and Address of	f Current Registered Agent		10. Name and Address of New Registered Agent
richardson, kevin F.		81 Na	ame
1551 FORUM PLAVCE		62 St	reet Address (P.O. Box Number is Not Acceptable)
SUITE 300-C	04	83	
WEST PALM BEACH FL 3340	J I	00	· · · · · · · · · · · · · · · · · · ·
		84 Ci	ty FL 85 Zip Code
11 Pursuant to the provisions of Sections	607 0502 and 607 1508 Florida	Statutes the above-na	med corporation submits this statement for the purpose of changing its registe
SIGNATURE Signature, typed or printed name of reg	pstered agent and life if applicable	(NOTE: Registered Agent sig	med corporation submits this statement for the purpose of changing its register corporation's board of directors. I hereby accept the appointment as registers inature required when reinstating. DATE APPLITIONS CHANGES TO GERGES AND DIRECTORS IN 150
SIGNATURE Superlane, typical or posted name of reg. 12. OFFIC INTE P	estered agent and little if applicable E HS AND DIRECTORS	(NOTE: Registered Agent sig	
SIGNATURE Signature, typied or printed name of reg 12. OFFIC TITLE P TANNENBAUM, BRUCE FOR HIGH FLYCO RD	estered agent and little if applicable E HS AND DIRECTORS	(NOTE: Registered Agent sig 13. ETE 1.1 TITLE 1.2 NAME	nature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Add
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SIGNATURE:

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

annen baum

3-17-57

561-697-4200

FILED

Mar 28 1997 8:00am

Secretary of State