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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

Suite, Apt #, etc Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required City & State City & State City & State 28 Country Country Country Suite, Apt. #, etc. 5. Certificate of Status Desired 6. Election Campaign Financing Trust Fund Contribution Added to Fees Country Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required Fee Required Stude to Fees Country Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required Stude to Fees Country Suite, Apt. #, etc. Fee Required Suite, Apt.		1997	10 mg	9	DIVISION OF	CORPORA	TIC	ONS						
Principal Place of Business 11780 US High-WAY ONE SUITE 600 NORTH PALM BEACH FL 33408 128	 Corporation 	n Name			(9)			-						
Name and Address of Current Registered Agent 10. Name and Address of New Registered A	ESI WE	st enfield,	INC.							(1881/80)	(; 0 10)) 0 10);	01011 11011 111)) ä l a ll 1	(3)
SUITE 600 NORTH PALM BEACH FL 33408 NORTH PA	Principal Plac	e of Business		Mailing	Address				-					
S. Dete Incorporated or Qualified Se. Date of Last Report Q/16/1996 Q/	SUITE 600 SUITE 600						408-3029							
Suite, Apt. #, etc Suite, Ap	1601111111111	DENOTITE DOTO		1101111	Triam Derion 12		•		3.					
27 City & State City & Statutes City	21			26					4.				lot App	olicable
28 Trust Fund Contribution	22			27		·		····	5.	Certificate of Status Desired				
25	City & State 23	e e		—————	& State				6.					
LEON, J E 9250 WEST FLAGLER STREET MIAMI FL 33174	Zip 24	25	·	29		}	ntry			Florida Statutes	() Yes	□ No SEI		
9250 WEST FLAGLER STREET MIAMI FL 33174 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 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 algorit, 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 and familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATU			Address of Current	Registered	Agent				10.	Name and Address of New Ro	egistered	Agent		
## City ## Display of the provisions of Sections 607 0502 and 607 1508, Florida Statules, 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 0506, Florida Statules. ### Signature]	B1	Name						
B4 City FL B5 Zip Code			er street			-	82	Street Add	réss (l	P.O. Box Number is Not Accepta	ble)	:		
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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signative, I plant of provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I purpose of change of changing its registered agent. I purpose of change of changing its registered agent. I purpose of change of changing its registered agent. In purpose of changing its registered agent	MIA	MI FL 33174			•	ļ						· · · · · · · · · · · · · · · · · · ·		
11. Pursuary to the provisions of Sections 607,0502 and 607,1508. Florida Statules, 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 agent I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE Signature, typind or period name of registered agent and title 1 applicable. (NOTE Registered Agent signature required when reinstating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ITILE SOME INTRODUCTORS IN 12 IN TITLE CARPENTER, FRANCES M SIREET ADDRESS 11760 US HIGHWAY ONE SUITE 600 13 STREET ADDRESS CITY ST. ZIP NORTH PALM BEACH FL 33408 14 CITY ST. ZIP NORTH PALM BEACH FL 33408 14 CITY ST. ZIP TITLE DV DELETE 3 TITLE OV Change Addition Addition Change Addition Change Addition Addition Change Addition Change Addition Addition Addition Change Addition	•					ľ	63							
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12.	SIGNATURE	Shorabine typool or north	ed name of registered agent	and fille flanolin	cable (NC)	TF Benistered	Ane	nt signature requi	red whe	h reinclation)	DATE			
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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 applial report of under oath; that I am an officer or director of the corporation or the receiver or trustee appropried 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 an application of the corporation or the receiver of the corporation or the receiver application of the corporation or the receiver of the corporation or the receiver or trustee endough the corporation or the receiver or the receiver of the corporation or the receiver or the receiver of the corporation or the receiver or the receiver of the receiver of t

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

Fnances M. Carpenter 4/5/97

(561) 691-3500

FILED

Apr 28 1997 8:00am

Secretary of State