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 # M97128

(6)

WAMPLER, BUCHANAN AND BREEN, P.A.

FILED
Jan 17 1997 8:00am
Secretary of State

Principal P.a. 777 BRICKELL 900 SUNTRUS MIAMI FL 331: US	it Building	Mailing Address 777 BRICKELL AVENUE 900 SUNTRUST BUILDING MIAMI FL 33131-2809 US		3. Date Incorporated or Qualified 3a. Date of Last Report			
					09/02/1988	03/21/1996	
2. Principal	Place of Business	2a. Mailing Address			4. FEI Number		Applied For
21		26	***		65-0082249		Not Applicable
Suite Apt	#, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired	7 - "	Additional
22		27					Required
City & Sta	ite	City & State			6. Election Campaign Financing		May Be
23 Zip	Country	28 Z(p	Countr	·, ·, ·, ·	Trust Fund Contribution		o 100 022
⊢			30	y	8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes Yes No		5. 199,032,
24	25 9. Name and Address of Currer		1301		10. Name and Address of New Re		
RDI	EEN, JAMES J.		81	Name			
) SUN BANK BLDG.		82	Cuest Add	ress (P.O. Box Number is Not Acceptate	la)	
	BRICKELL AVE.		0.2	Sireet Add	ress (F.O. Box Number is Not Acceptate	ле,	
	MI FL 33131-2803		83	3			
			84	City		85 Zu	o Code
						FL	
agent I SIGNATURE	are tandlar with land accept the oblig	ations of Section 607.0505, F	iorida St a tuk	95.	poration submits this statement for the pation's board of directors. I hereby acception when reinstang) ADDITIONS/CHANGES TO OFFICE	DATE	
THLE	DP	DELETE	1.1 TITLE			☐ Change	Addition
NAME	WAMPLER, ATLEE W. III		1.2 NAME				
STREET ADDRESS	777 BRICKELL AVE		1 3 STREE	1 ADDRESS			
C(TY+ST-7)P	MIAMI FL		1.4 CiTY-	ST-ZIP			
TITLE	_		21 TITLE			L Change	e 🔲 Addition
NAME	BUCHANAN, JOSEPH R.		2 2 NAME				
STREET ADDRESS				1 ADDRESS			
CITY - S1 - 2IP	MIAMI FL	1 neitte	2.4 0/17	- ST - ZIP		Change	e
TITLE	DVP	DELETE	3 1 TITLE 3 2 NAME			— ∪iidikji	Auditoli
NAME GENEET KONSTAN	BREEN, JAMES J. 777 BRICKELL AVE						
STREET ADDRESS	MIAMI FL			ET ADDRESS			
CITY-ST-ZIP TITLE	DST	DELETE	34 City 41 Title			☐ Change	Addition
NAME	WALKER, MICHAEL B.		4 2 NAM	1		B	
STREET ADDRESS	THE BOYOUTH AVENUE			T ADDRESS			
CRY-ST-ZIP	MIAMI FL		4 4 CITY-	1			
TITLE	DVP	DELETE	5 1 TITLE			Chang	e Addition
NAME	CHABROW, PENN B.		5.2 NAME				
STREET ADDRESS	777 BRICKELL AVE.		5.3 STREE	ET ADORESS			
CITY+ST-ZIP	MIAMI FL		5.4 CHY-	.\$1ZIP			
TITLE		DELETE	6.1 TiTLE			L Chang	e Addition
NAME			6.2 NAME				
STREET ADDRESS	; ·		63 STREE	ET ADDRESS			
CHY-ST-ZF			64 CITY-	-ST - Z IP			

14. If 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 and cated 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:

While Will War Philaded Name of Signing Officer or Director

197 305-577-004 Daytone Plane #