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

PROFIT **CORPORATION ANNUAL REPORT**

1997



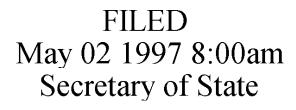
FLORIDA DEPARTMENT OF STATE

Sandra B. Mostham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000079252 (9)

COMPAX, INC.





Principal Place of Business Mailing Address 1712 NORTHGATE BLVD. 1712 NORTHGATE BLVD. SARASOTA FL 34234 SARASOTA FL 34234-2116							
					 Date Incorporated or Quali 10/12/1995 	fied 3a. Date of 03/30/1	Last Report
2. Principal P	lace of Business	2a. Mailing Address 26			1 *	5-068 2647	Applied For Not Applicable
Sulte, Apt.	#, etc.	Suite, Apt. #, etc).		5. Certificate of Status Desire	d 🗆 \$	8.75 Additional Fee Required
City & Stat	ө	City & State			Election Campaign Financia Trust Fund Contribution		5.00 May Be Added to Fees
Zip 24	Country 25	7ip 29	30	itry	This corporation has liabilit Florida Statutes	Yes N	0
	9. Name and Address of Curre	ent Registered Agent			10. Name and Address of Ne	w Registered Ager	nt
	MSTER, RAINER T		,	81 Name			
	NORTHGATE BLVD.		ŀ	82 Street Add	dress (P.O. Box Number is Not Acc	optable)	
SAR	ASOTA FL 34234		1				
	•			83			
			f	B4 City		- 85	Zip Code
11 Purpugat	to the provisions of Sections 607.06	02 and 607 1509 Florida 9	Statutor the eb	Ove named cor	reporation cultimite this statement for	FL the purpose of cha	Paina its registered
agent. I a SIGNATURE	to the provisions of Sections 607.05 registered agent, or both, in the Statum familiar with, and accept the obligional support of the section				uired when reinstating) ADDITIONS/CHANGES TO 0	DATE	
TITLE	D	DELET		.F			Change Addition
NAME	BLOMSTER, RAINER T		1 2 NA	vit.	•		
STREET ADDRESS	1712 NORTHGATE BLVD.		13 516	EET ADDRESS			
CITY-ST-ZIP	SARASOTA FL 34234		1.4 CII	Y-ST-ZIP			
TITLE	V	DELETI	E 2.1 TIT	F			Change Addition
NAME	MONK, ANTHONY		2.2 NA	JE			
STREET ADDRESS	6075 KESTREL RD		2.3 STF	EET ADDRESS			
CITY-ST-ZIP	MISSISSAUGA, ONT, CANADA			Y-ST-ZIP			
TITLE	8	DELETI	31717	.E			Change
NAME	RUTHERFORD, ROBERT G		3.2 NA				
STREET ADDRESS	6075 KESTREL RD	4		EFT ADDRESS			
CITY-ST-ZIP	MISSISSAUGA, ONT, CANADA	· · · · · · · · · · · · · · · · · · ·		Y-ST-ZIP			Channe Taddy
TITLE	1		E 4.1 TIT	.t l		L	Change Addition
A	}	[_] DELET	1	}			
NAME		L DELET	4. 2 NA				
STREET ADDRESS		[_] DELET	4. 2 NA 4.3 STF	EET ADDRESS			
STREET ADDRESS CITY-ST-ZIP		-	4. 2 NA 4.3 STF 4.4 CIT	Y-ST-ZIP			Change Addition
STREET ADDRESS CITY-ST-ZIP TITLE		DELET	4. 2 NA 4.3 STF 4.4 CIT E 5.1 TII	EET ADDRESS Y-ST-ZIP			Change
STREET ADDRESS CITY-ST-ZIP TITLE NAME		-	4. 2 NA 4.3 STF 4.4 CIT E 5.1 TIT 5.2 NA	Y-ST-ZIP			Change Addition
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STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME		DELETI	4.2 NA 4.3 STF 4.4 CIT 5.1 YIT 5.2 NAI 5.3 STF 5.4 CIT 6.2 NAI	EET ADDRESS Y-S1-ZIP AE EET ADDRESS Y-S1-ZIP EET ADDRESS Y-S1-ZIP E			
STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE		DELETI	4.2 NA 4.3 STF 4.4 CIT 5.1 TIT 5.2 NAI 5.3 STF 5.4 CIT E 6.1 TITI 6.2 NAI 6.3 STF	EET ADDRESS Y-ST-ZIP LE AE EET ADDRESS Y-ST-ZIP LE			

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 of tamen 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, at on an attachment with an address.