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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # \$90748

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1301 BRANDON CORPORATION

FILED
Mar 26 1997 8:00am
Secretary of State

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1601 BELVEDI SUITE 407 SO WEST PALM E US		Ma'ing Address 1601 Belvedere Road Suite 407 South West Palm Beach Fl US	33406-1541			
			-\		3. Date Incorporated or Qualified 10/30/1991	3a. Date of Last Report 03/20/1996
21	Table of Husiness	2a. Mailing Address 26			4. FEI Number 65-0295618	Applied For Not Applicable
Suite, Apt		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat <b>23</b> ]		City & State		· · · · · · · · · · · · · · · · · · ·	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Ζφ <b>24</b> ]	Country [25]	Ζφ [29]	30 Cour	ntry		🕽 Yes 🔲 No
 QEI	Name and Address of Currel  CON CADV N	nt Hegistered Agent		81 Name	10. Name and Address of New Re	gistered Agent
	RSON, GARY N. 15 PALM BEACH LAKES BLVD.		į	7,64110		
	TE 1200			82 Street A	Address (P.O. Box Number is Not Acceptab	ole)
	ST PALM BEACH FL 33401		Ì	83		
			}	84 City		FL 85 Zip Code
office or i agent. La	to the provisions of Sections 607.050 togistered agent, or both, in the State im familiar with, and accept the oblig	: of Horida, Such change was	authorized	l by the cord	corporation submits this statement for the population's board of directors. I hereby accept	virgoes of changing its registered
SIGNATURE	Sign in which proved in a lot registered by	ritand litter applicable (NO	TE Rugistered	Agent signature	required when reinstating)	DATE
12.	OFFICERS AN	ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12
`Mt <del>i</del>	}	☐ DELETE				
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NAM:	METZ, JOHN	_	1 2 NA	ME		Change Addition
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		— श	12 NA 13 STI 14 CIT	ME IEET ADDRESS Y-ST-ZIP	Wfalm BeachFl 3	3405
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4. 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 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 orienter 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:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone: