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 # V44263

(4)

Principal Prac	•	Mailing Address 2107 S.E. OCEAN BLVD.		· · · · · · · · · · · · · · · · · · ·				
STUART FL 34		STUART FL 34996-3305			Date Incorporated or Qualified		ate of Last Re	əport
2 Principal P	lace of Business	2a. Mailing Address			06/17/1992 4. FEI Number	10/2	23/1996	plied For
21		26		65-0369542	Not Applicable			
Suite, Apt	#, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75	
22		27	····	<u>-</u>			Fee Re	
City & Stat	U	City & State			6. Election Campaign Financing Trust Fund Contribution		\$5.00 Added t	
7 _{ip}	Country	Zip	Country		8. This corporation has liability to			
24	25		10		Florida Statutes	Yes [□ No	,
	9. Name and Address of Curre	nt Registered Agent		• • • • • • • • • • • • • • • • • • • •	10. Name and Address of New I	legistered .	Agent	
	NK, LLOYD		81	Name				
3 CEANN COURT PALM BEACH GARDENS FL 33418				Street Add	dress (P.O. Box Number is Not Accept	able)		
FAL	M DEMON CANDENS PE 33410		63	*******				
				- A			12-1	n -1.
			84	City	rporalion submits this statement for the ation's board of directors. I hereby acc	FL	85 Zip (
SIGNATURE	Signature, (guest or pented como of region act at OFFICERS At	non and tille if applicable (NOTE) ND DIRECTORS DELETE	Registered Age 13. 1.1 TITLE	nt signature requ	ured when reinstating) ADDITIONS/CHANGES TO OFF	DATE FICERS AND	DIRECTOR	S IN 12
THTLE NAME	BLANK, LLOYD	(DELETE	1.1 TITLE 1.2 NAME		ing diagram and a second a second and a second a second and a second a second and a		Change	L.J ADDRION
STREET ADDRESS	3 CEANN COURT		1.3 STREET	ADDRESS				
CITY - ST - ZIF	PALM BEACH GARDENS FL	33418	1.4 CITY-S					
TITLE		☐ DELETE	2.1 TITLE				Change	Addition
NAME			22 NAME	- 1				
STREET ADDRESS			2.3 STREET	Ĭ				
CHY-ST-ZIP TITLE		DECETE	2. 4 City - 5	ST-ZIP			Change	Addition
NAME			3.2 NAME				(22)	
STREET ADDRESS			3.3 STREET	ADDRESS				
CITY - ST - 7IP			3.4. CITY-5	ST - ZIP				····
MILE		L DELETE	4.1 TITLE				Change	Addition
NAME Product appreces			4. 2 NAME	ADDOCCO				
STREET ADDRESS CHY-ST-ZIP			4.3 STRE€T 4.4 CITY~S	ĭ				
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NAME			5.2 NAME	ļ				
STREET ADDRESS			5 3 STREET	ADDRESS				
CITY-ST-7IF		☐ DELETE	5 4 CITY - S	T-ZIP			Change	I Ad
THE			6.1 TITLE 6.2 NAME				Change	۸۵۰ لی
STREET ADDRESS			6.3 STREET	ADDRESS				
0.31: 07. 20			E A CITY O					

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 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 chapter for on an apachment with address.

SIGNATURE:

FILED

Apr 24 1997 8:00am

Secretary of State

Daytime Phone 4