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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Mar 12 1997 8:00am

Secretary of State

Daytime Phone #

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S43811

(6)

PERLES & COMPANY, INC.

City & State City & City & State City & City & State City &	Additional Required May Be to Fees s. 199.032,
Suite, Apt #, etc. Suite	lot Applicable Additional Required May Be I to Fees s. 199.032,
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2 27 City & State City & Sta	May Be I to Fees s. 199.032,
Trust Fund Contribution	to Fees s. 199.032, Code
Zip Zip Zip Country Zip Country 25 29 30	S. 199.032, Code
9. Name and Address of Current Registered Agent 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent PERLES, SUZANNE R. 3200 NORTHEAST 36TH STREET SUITE 1010 FORT LAUDERDALE FL 33308 82 Street Address (P.O. Box Number is Not Acceptable) 83 City FL 85 Z City FL 85 Z City FL 85 Z City FL 85 Z Street Address (P.O. Box Number is Not Acceptable) 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 changin 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 agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE Signature I special or point is cert with glidered agent and state Lappacable (NOTE Registered Agent signature required whon reinstating) DATE 12. OFFICE RS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECT INTIE OFFICE RS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECT INTIE OFFICE RS AND DIRECTORS 1.3 STREET ADDRESS SIGNATURE 2.2 NAME 2.3 STREET ADDRESS CITY SIT 2P DELETE 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS CITY SIT 2P DELETE 3.1 TITLE 2.3 STREET ADDRESS CITY SIT 2P DELETE 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS CITY SIT 2P DELETE 3.1 TITLE 3.3 STREET ADDRESS CITY SIT 2P DELETE 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS CITY SIT 2P DELETE 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS CITY SIT 2P DELETE 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS CITY SIT 2P DELETE 3.1 TITLE 3.3 STREET ADDRESS CITY SIT 2P DELETE 3.1 TITLE 3.1 TITLE 3.1 TITLE 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS CITY SIT 2P DELETE 3.1 TITLE 3.1 TIT	Code
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T1. Pursuant to the provisions of Sections 607,0502 and 607-1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changin 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 agent. I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE Description Descr	ite registered
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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 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.	