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**PROFIT CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT # F91670** 

(2)

## **FILED** Mar 14 1997 8:00am Secretary of State

Principal Place 8533 NW 24TH CORAL SPRIN	СТ	Mailing Address 8533 NW 24TH CT CORAL SPRINGS FL 33065-5302						
					3. Date incorporated or Qualified 07/20/1982	1 *	te of Last P 2/1996	leport
9 Principal P	lace of Business	2a. Mailing Address			4. FEI Number	1 0//0		oplied For
21	ideo of Eddiness	26			59-2217081			ot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #. etc.				<u></u>		Additional
22		27			5. Certificate of Status Desired	LJ	Fee Re	equired
City & Stat	е	City & State			6. Election Campaign Financing		\$5.00	Мау Ве
23		28	т		Trust Fund Contribution	Ц		to Fees
Zip	Country	Zip 1.11	Country		8. This corporation has liability for			. 199.032.
24	25 25 Name and Address of Curre	29	30]		Florida Statutes  10. Name and Address of New Re	Yes	_	
ONI	<del></del>	aur Liedisteien Wasin	81	Name	IV. Hame and Address of New N	ofisición h	Rain	
	AREW, JAY 3 NW 24TH CT		ļļ			<del> </del>	<i>.</i>	
	RAL SPRINGS FL 33065		82	Street Addr	ress (P.O. Box Number is Not Accepta	ible)		
OOF	AL OF MINOS FE 50005		83					
							11 5	
•			84	City		FL	85 Zip	Code
11. Pursuant office or r	to the provisions of Sections 607.05 registered agent, or both, in the States the familiar with, and account the obligations.	i02 and 607.1508, Florida Statute of Florida, Such change was reations of Section 607.0506. F	ites, the above authorized by lorida Statutes	named corp the corporal	poration submits this statement for the lion's board of directors. I hereby acce	purpose of opt the appo	changing i pintment as	ts registered registered
agent. I a	m familiar with, and accept the obli	gations of, Section 607.0505, F	lorida Statutes	i.	red whee remstating]	DATE		
agent. I a SIGNATURE 12.	m familiar with, and accept the obli Signature typed or prived here of logistered a OFLICERS AI	gations of, Section 607.0505, F great and tilk Tapposabe (NC ND DIRI CTORS	lorida Statutes  II. Registeres Agent	i.		DATE CERS AND	DIRECTOR	
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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 changed, or on an attachment with an address.