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

CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # J52790

(9)

FIVE-TWELVE CORPORATION

**FILED** May 09 1997 8:00am Secretary of State



Principal Place of Business Mailing Address  FRANCIS A. GALBRAITH  5260 COUNTERPLAY ROAD  PALM BEACH GARDENS FL 33418-7810  Mailing Address  FRANCIS A. GALBRAITH  5260 COUNTERPLAY ROA  PALM BEACH GARDENS I				810						
						<ol> <li>Date incorporated or Qualified 01/21/1987</li> </ol>	- ***	ite of Las <b>06/199</b> (	•	
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number	1 997		Applied For	
21		26				65-0020475			Not Applicab	
Suite, Apt	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired			5 Additional Required	
City & State	e	City & State				Election Campaign Financing     Trust Fund Contribution			May Be	
Zıp	Country	Zip	Zip Country			8. This corporation has liability for intangible tax under s. 199.032,				
24	25 29		30			Florida Statutes Yes No				
	g, Name and Address of Curre	ent Registered Agent				10. Name and Address of New Re	gistered .	Agent		
	LBRAITH, FRANCIS A		İ	B1 Nan	ne					
	0 Counterplay RD. .M Beach Gardens FL 33415	,	ļ	82 Stre	et Addres	fréss (P.O. Box Number is Not Acceptable)				
				83						
				64 City	· · · · · · · · · · · · · · · · · · ·		FL	85 Z	ip Code	
office or r	to the provisions of Sections 607.05 registered agent, or both, in the Stat m familiar with, and accept the obli	le of Florida. Such change wa	as authorized	by the c	ed corpo corporatio	ration submits this statement for the p n's board of directors. I hereby accep	urpose of the app	changin ointment	g its registere as registered	
SIGNATURE	Signature, typed or portled name of registered a	good and tille of applicable	NOTE Pagistared	Accot sinns	thurs required	when reinstating)	DATE		·	
12.		ND DIRECTORS	13.	Service British	ilora ledonina	ADDITIONS/CHANGES TO OFFIC		DIRECT	ORS IN 12	
TITLE	D	☐ DELETE	1.1 7(7)	.f	<del></del>			Chang		
NAME	GALBRAITH, FRANCIS A		1.2 NAI	ME	1					
STREET ADDRESS	5260 COUNTERPLAY RD		1.3 STF	EET ADDRES	ss l					
CITY-ST-ZIP	PALM BEACH GDNS FL		1.4 C/T	Y·ST-ZIP						
TITLE	D	DELETE	2.1 <b>T</b> IT	.E				Chang	je 🔲 Additio	
NAME	PRESSEL, RAYMOND A		2.2 NA	ME	Ì					
STREET ADDRESS	5260 COUNTERPLAY RD		2.3 ST	EET ADDRES	SS					
CITY-ST-7IP	PALM BEACH GONS FL		2.4 01	Y-ST-ZIP						
TITLE		DELETE	3.1 TiT	.E				Chang	je 🔲 Additio	
NAME			3.2 NA	ME	1					
STREET ADDRESS			3.3 STF	REET ADDINES	SS					
CITY-ST-7/F				Y-ST-ZIP				T 1 &		
TITLE		L DELETE	4.1 7(7)					L. Chang	je 🔝 Additio	
NAME			4. 2 NA		1					
STREET ADDRESS				REET ADDRES	SS [					
CITY - ST - ZIP		DC/ ETF		Y-ST-ZIP				Chang	e Additio	
TITLE		DELETE	5.1 TIT		İ			rm cuant	JC [] AUQIIII	
NAME			5.2 NA		\					
STREET ADDRESS			1	REET ADDRES	SS					
CITY ST-ZIP		DELETE		Y-ST-ZIP				Chang	e Additio	
TITLE	1	LJ DELETE	6.1 117					L. CHAIL	ke FTT wording	
NAME			62 NA		.					
STREET ADDRESS			1	IEET ADDRES	ss					
CITY-S1-2IP	L. continue that the information	ad with this fillion does not at		Y-ST-ZIP	n stated !	n Section 119 07(3)(i) Florida Statute	n I furthe			

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 early; 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.

SIGNATURE:

A Galbrank Bes