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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jun 24 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

THE C	MENT # On Name  AND C BUIL  De of Business	# 19579 LDING INC.	)8 Mailing A	(4)					
708 GLADWIN AVENUE FERN PARK FL 32730			708 GLADI	708 GLADWIN AVENUE FERN PARK FL 32730-2004					
			12		· -		3. Date incorporated or Qualified 09/04/1956	3a. Date of Last 05/01/1996	•
	Place of Busines	55	2a. Mailing	g Address			4. FEI Number	<del></del>	Applied For
Suite, Apt.	#. etc.		26 Suite	Apt. #, etc.			S9.75 Additional		Not Applicable
22			27	φι. η σισι			5. Certificate of Status Desired	, , , , ,	Required
City & Stat	te		City &	State			6. Election Campaign Financing	\$5.0	0 May Be
23			28	28			Trust Fund Contribution Added to Fees		
Zip 24	Country 25		Z(p 29			,	8. This corporation has liability for intengible tax under s. 199.032, Florida Statutos ☐ Yes ☐ No		r s. 199.032,
	9. Name ar	nd Address of Cu	rrent Registered A	gent		1	10. Name and Address of New Re	gistered Agent	
	NDEL, DOROT				81	Name			
708 GLADWIN AVENUE				82 Street Add			dress (P.O. Box Number is Not Acceptab	ile)	· ·
FERN PARK FL 32730					83				
!									
					84	City		FL 85 Zi	p Code
	to the provision registered agen am familiar with,	ns of Sections 607 at, or both, in the S and accept the c	.0502 and 607.1508 State of Ftorida. Such abligations of, Section	i, Florida Stat n change was n 607.0505, l	utes, the above authorized by Florida Statute	e-named cor the corpora s.	poration submits this statement for the patients board of directors. I hereby acceptions	urpose of changing at the appointment i	g its registered as registered
SIGNATURE	Signature, lyped or	printed name of registers	id agent and title if applicati	le (N	D1E Registered Age	nnt signature requ	uired when reinstating)	DATE	
12.	T	OFFICERS	AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFIC		
TITLE	PD			☐ DELETE 1.1 TH				☐ Change	e 🔲 Addition
NAME	WENDEL, D			1.2 NAI					
STREET ADDRESS	FERN PARK	/IN AVENUE				ACIDRESS			
CITY-ST-ZIP TITLE	TENN FARM	\		DELETE	1.4 CITY - S 2.1 TITLE	I-ZIP		☐ Change	e Addition
NAME	WENDEL, D	OROTHY		2.2 h				<u> </u>	
STREET ADDRESS	1 1 1 1 1 1 1 1 -			2.3 \$10					
CITY-ST-ZIP	FERN PARK				2. 4 CITY-				
TOTLE	SĎ	···-		☐ DELFTE	3.1 TITLE			☐ Changi	e Addition
NAME	CARLSON, ROY				3.2 NAME				
STREET ADORESS					3.3 STREET	ADDRESS			
CITY-ST-ZIP	MIAMI,,FL				3.4. CITY-	ST-ZIP			
TITLE				DELETE	4.1 TITLE		,	∐ Change	e 📙 Addition
NAME					4.2 NAME				
STREET ADDRESS					4.3 STREET				
CITY-ST-ZIP TITLE				DELETE	4.4 CITY - S 5.1 TITLE	1-212		Change	e
NAME					5.2 NAME				
STREET ADDRESS					5.3 STREET	ADDRESS			
CITY-ST-ZIP					54 CITY-S				
TITLE				DELETE	61 TITLE			☐ Change	e 🔲 Addition
NAME					62 NAME				
STREET ADDRESS					63 STREET	ADDRESS			
CITY-ST-ZIP	nu partifu shat sh	n internation sur	plied with this file -	dono not o :-	6.4 CITY-S		d in Section 119.07(3)(i). Florida Statute	I forther a series of	-1 46 -

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 eath; 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.