

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

FILED  
Apr 03 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # **285274** (7)  
1. Corporation Name  
**FIDELIFACTS, INC.**



Principal Place of Business  
**12000 BISCAYNE BOULEVARD  
305  
MIAMI FL 33181  
US**

Mailing Address  
**12000 BISCAYNE BOULEVARD  
305  
MIAMI FL 33181-2720  
US**

2. Principal Place of Business  
21 Suite, Apt. #, etc.  
22 City & State  
23 Zip Country  
24 Zip Country

2a. Mailing Address  
26 Suite, Apt. #, etc.  
27 City & State  
28 Zip Country  
29 Zip Country

3. Date Incorporated or Qualified  
**09/22/1964**

3a. Date of Last Report  
**03/11/1996**

4. FEI Number  
**05-9118009**

5. Certificate of Status Desired ☐ **\$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

**DUBOIS III, EDWARD L  
12000 BISCAYNE BOULEVARD, SUITE 305  
MIAMI FL 33181**

10. Name and Address of New Registered Agent

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City FL 85 Zip Code

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 changing its registered 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 as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title, if applicable

(NOTE: Registered Agent signature required when re-instating)

DATE

OFFICERS AND DIRECTORS

12. OFFICERS AND DIRECTORS

| TITLE | NAME                   | STREET ADDRESS            | CITY-ST-ZIP | DELETE                   |
|-------|------------------------|---------------------------|-------------|--------------------------|
|       | DUBOIS, EDWARD L., III | 12000 BISCAYNE BLVD. #305 | MIAMI FL    | <input type="checkbox"/> |
|       |                        |                           |             | <input type="checkbox"/> |
|       |                        |                           |             | <input type="checkbox"/> |
|       |                        |                           |             | <input type="checkbox"/> |
|       |                        |                           |             | <input type="checkbox"/> |
|       |                        |                           |             | <input type="checkbox"/> |

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

| TITLE | NAME | STREET ADDRESS | CITY-ST-ZIP | DELETE                   | Change                   | Addition                 |
|-------|------|----------------|-------------|--------------------------|--------------------------|--------------------------|
| 1.1   |      |                |             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1.2   |      |                |             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1.3   |      |                |             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 1.4   |      |                |             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2.1   |      |                |             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2.2   |      |                |             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2.3   |      |                |             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2.4   |      |                |             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3.1   |      |                |             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3.2   |      |                |             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3.3   |      |                |             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3.4   |      |                |             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4.1   |      |                |             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4.2   |      |                |             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4.3   |      |                |             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4.4   |      |                |             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5.1   |      |                |             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5.2   |      |                |             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5.3   |      |                |             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5.4   |      |                |             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6.1   |      |                |             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6.2   |      |                |             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6.3   |      |                |             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6.4   |      |                |             | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

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 changed, or on an attachment with an address.

SIGNATURE:

*Edward L. Dubois III*  
12000 BISCAYNE BLVD. #305 MIAMI FL 33181

CR2E034 (9/96)