## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # 398726 1. Corporation Name

(0)

FILED Feb 26, 1996 08:00 AM **Secretary of State** 



MATIONIAL	CHOHIDED	INIA
NATIONAL	ENQUIRER.	INU

Principal Place of Business	Mailing Address			
600 S E COAST AVE	600 S E COAST AVE			
LANTANA FL 33464	LANTANA FL 33464			

	E COAST AVE NA FL 33464	800 S E COAST AVI LANTANA FL 33464	Ē							
						3. Date Incorporated or Qualified	3a. Date	of Last	Report	
						04/05/1972	01	/27/1	995	
2. Princip	Principal Place of Business 2a. Mailing Address					4. FEI Number			Applied For	
21		26				59-2764097		Not Applicable		
Suite, Apt. #, etc. 27		Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required			
Oity & 23	City & State         City & State           28		Đ <b>b</b>			6. Election Campaign Financing Trust Fund Contribution	D	\$5.00 May Be Added to Fees		
Zip 24	Country 25	Zıp <b>29</b>	30	Country  8. This corporation has liability for intangible Florida Statutes   Yes  No				under	s 199.032,	
	9. Name and Address of Curr	rent Registered Agent			1	0. Name and Address of New R	egistered A	gent		
GALIARDO, GUY 600 SOUTH EAST COAST AVE LANTANA FL 33462			82 Street Address (P.O. Box Number is Not Acceptable) 83							
				<b>84</b> C	City		FL	85 2	Zip Code	
OF 100	uant to the provisions of Sections 607.05 gistered agent, or both, in the State of Flu ar with, and accept the obligations of, So	orida. Such change was authori	zea by the a	ve-nam corpora	ned corporation tion's board of	submits this statement for the purp directors. Thereby accept the appo	pose of char pintment as r	iging its egistere	registered office ed agent. I am	
SIGNATU	RE Signature: typed or printed name of registered as	ent and bite if emploable (N	OTE: Roastered	Agent sig	nature required when	reinstation)	DATE			
12.	OFFICERS A	AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				
TITLE	PD	☐ DELETE	1. 1 7	TLE				Change		
NAM8	CALDER, IAIN		1.2 N/	ME	Cal	.der,Iain			_	
STREET ADDR	· ·		1.3 \$7	REFT ADD	RESS 600	S.E. Coast Ave	enue			
CHY+S1+ZIP			14 CI	TY-ST-ZI		tana,FL 33464				
TILF	S	☐ DELETE	2 1 1					Change	Addition	

GALIARDO, GUY NAME 22 NAME STREET ADDRESS 600 S.E. COAST AVE 23 STREET ADDRESS CHY-ST-ZIP LANTANA FL 24 CITY-ST-ZIP DELETE THUE 3 1 TITLE Change Add:tion NAME BOYLAN, MICHAEL 3 2 NAME Boylan, Michael STREET ADDRESS 600 S.E. COAST AVE 3.3 STREET ADDRESS 600 S.E. Coast Avenue CHY ST-ZIP LANTANA FL 3.4 CITY - ST - ZIP Lantana, FL 33464 DELETE TIME 4.1 TITLE Change Addition NAM: PICKERT, RICHARD **4.2 NAME** STREET ADDRESS 600 S.E. COAST AVE 4.3 STREET ADDRESS LANTANA FL 4.4 CITY - \$1 - 2IP TITLE DELETE 5 1 TITLE CD Change Change Addition CALLAHAN, PETER NAM: Callahan, Peter 52 NAME STREET ADDRESS 600 S.E. COAST AVE 53 STREET ADDRESS 600 S.E. Coast Avenue CHTY - ST - 7IE <u>Lantana Fl</u> 54 CITY-ST-ZIP Lantana, FL 33464 X DELETE ☐ Change 6 1 TITLE Addition MILLEN, RICHARD 62 NAME Nelson, Peter A. STREET ADDRESS 600 SE COAST AVE. 63 STREET ADDRESS 600 S.E. Coast Avenue

LANTANAF L. 64 CITY-ST-ZIP Lantana FL 33464

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 cath; 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 charges or or in attachment with an address

SIGNATURE:

2/19/96