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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## 1997 DOCUMENT # 400941

(1)

DEVCON CARIBBEAN PURCHASING CORP.

i '	ce of Business EWPORT CENTER DR	Mailing Address 1350 EAST NEWPORT CENTER OR									
STE. 201	ALL EL 20449 7770	STE. 201									
UEEMPIELU B	CH. FL 33442-7779	DEEMPIELD BON, PL 334	DEERFIELD BCH. FL 33442-7779				3. Date Incorporated or Qualified 04/19/1972 02/19/1996				
2. Principal f	Place of Business	2a. Mailing Address	·····				4. FEI Numbe		J OE		pplied For
21		26					59-1419		,	h	ot Applicable
Suite, Apt	#, etc	Suite, Apt. #, etc.	Suite, Apt. #, etc.					of Status Desired	IV.	\$8.75	Additional
22		27					<b>9.</b> Octinicato	or Grando Desireo			equired
City & Sta	te	City & State						mpaign Financing			May Be
<b>Z</b> ip	Country	<b>28</b> Ζιρ	o Country					Contribution	<del></del>		to Fees
24	25	29 30				<b>8.</b> This corporation has liability for intangible tay under s. 199.032, Florida Statutes ☐ Yes ☑ No					
	9. Name and Address of Curren						10. Name and	Address of New R	egistered	Agent	
ZIA	OLLA, BEVERLY			81	Name						
1350 EAST NEWPORT CENTER DR				82	Street	Addres	ss (P.O. Box Nur				
DEERFIELD BCH. FL 33443				83			<del></del>				
•				84	City			•	FL	85 Zip	Code
11, Pursuant	to the provisions of Sections 607,050	2 and 607.1508, Florida State	utes, the a	pove	-named	corpo	ration submits th	is statement for the			its registered
office of agent. fix	to the provisions of Sections 607.050 registered agent, or both, in the State am familiar with, and accept the obliga	of Florida. Such change was ations of, Section 607.0505, F	; authorize Iorida Sta	o by tutes	the corp	poratio	n's board of dire	ctors. I hereby acc	ept the ap	pointment as	registered
SIGNATURE											
	Signature, typed or printed name of registered age			d Age	nt signature	required	when reinstating!	0.1.1.000 #0.000	DATE	DIDEO O	20.00
12.	OFFICERS AND DIRECTORS    VD		13.	13.			ADDITIONS	CHANGES TO OFF	ICERS AN	Change	Addition
NAME	HORASBY, RICHARD L	<b>_</b> •	1.2 N			Ho	RNSBV.	RICHARD	6.		
STREET ADDRESS	1350 EAST NEWPORT CENTE	r drive	1.3 S	TREET	address	''	• • • • • • • • • • • • • • • • • • • •	•			
CHY-ST-ZIP	DEERFIELD BEACH FL		1,4 0	ITY-S	T-21P						Ì
TITLE	PD DELETE			2 1 TITLE						Change	☐ Addition
NAME	SMITH,DONALD L	_	22 NA		ME						
STREET ADDRESS	1000 = 11	R	- 1		ADDRESS	ļ					ļ
CITY - ST - ZIP	DEERFIELD BEACH FL	☐ DELETE		2. 4 CITY - ST - ZIP 3.1 TITLE		<del> </del>				☐ Change	Addition
TIILE NAME	OBENAUF, H. C.		3.1 II 3.2 N							— orange	First Modifical
STREET ADDRESS	1350 E NEWPORT CENTER DI	R			ADDRESS						
CITY-ST-ZIP	DEERFIELD BEACH FL	•		OITY-S							ĺ
TITLE	S	DELETE	4.1 T							Change	Addition
NAME	ZIROLLA, BEVERLY		4.21	NAME							
STREET ADDRESS	1350 E NEWPORT CENTER D	R	4.3 S	TREET	ADDRESS						
CITY - ST - ZIP	DEERFIELD BEACH FL			ITY-S	7-ZIP		··	· · · · · · · · · · · · · · · · · · ·		T 7 A	1 1 1 1 1 1 1 1 1
TITLE	OTV	DELETE	51 Ti			1				Change	Addition
NAME OTRECT ASSOCIATION	BARRETT, WALTER B.	D	5.2 N		A DODGE OF						
STREET ADDRESS	1350 E NEWPORT CENTER DI DEERFIELD BEACH FL	п	1		ADDRESS						
CITY-ST-ZIP	DECREIGHD DEACH FL	DELETE	5.4 C	ITY-S ITLE	ı•zır		·			Change	Addition
NAME		mant was a fire	6.2 N								
STREET ADDRESS					ADDRESS						
COV CT 700				UTV P		1					ţ

SIGNATURE:

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.

**FILED** 

Feb 04 1997 8:00am

Secretary of State

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