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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 461041

(6)

RICHARD M. MOWRY, JR., P.A.

FILED Apr 18 1997 8:00am Secretary of State

Principal Place	Tincipal Place of Business Mailing Address										
1618 SE 3RD ( DEERFIELD BE	### DEERFIELD BEACH FL 33441-4419  3. Date Incorporated or Qui  09/12/1974										
							Date Incorporated or Qualified     09/12/1974		te of Las 08/199	st Report	
2. Principal Pi	ace of Business	20.	Mailing Address				4. FEI Number			Applied For	
1		26					59-1549160			Not Applica	
Suite, Apt :	#, etc	27	Suite, Apt. #, etc.				5. Certificate of Status Desired			5 Additional Required	
City & State	)		City & State				6. Election Campaign Financing		\$5.0	00 May Be	
3		28					Trust Fund Contribution		Add	ed to Fees	
Ζιρ	Country	<u> </u>	Zφ	Cou	intry	1	8. This corporation has liability for			er s. 199.032	
4	25	29		30		·		Yes [			
	9. Name and Address of Curre	nt Regis	stered Agent	· · · · · · · · · · · · · · · · · · ·	0.4	T & I	10. Name and Address of New Re	gistered A	gent		
MO/	WRY JR, RICHARD M.				B1	Name					
135	1 BANYAN ROAD				82	Street Add	iress (P.O. Box Number is Not Acceptat	ole)			
800	CA RATON FL 33432				<u> </u>						
					83						
					84	City			85 Z	Zip Code	
						,		FL	1 1	•	
SQUITAIASIS				Florida Stat	tutes	S.	poration submits this statement for the pation's board of directors. I hereby acception				
	Signature, typed or printed name of registered ag				d Age	ent signature requ	ired when reinstating)	DATE			
12	OFFICERS AN	ID DIRE		13.			ADDITIONS/CHANGES TO OFFICE	ERS AND			
IITLE	PD		☐ DELETE	1.1 TO					☐ Chan	ge 🔲 Addi	
NAME	MOWRY JR, RICHARD M			1.2 N							
STREET ADDRESS	1351 BANYAN ROAD			<b>.</b>		I ADORESS					
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NAME	MOWRY, MARY O			22 N							
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NAME	AZZARELLO, RITA E			3.2 N							
STREET ADURESS	2450 DEER CREEK CC BLVD					TADDRESS					
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NAME				4. 2 N							
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STREET ADDRESS				6.35	TREET	TADDRESS					
CHTY -ST - ZIP				6.4 C	ITY-S	ST-ZIP					

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: Kichard M. Moury J. RICHARD M. MOWRY JR. 4-15-97 954-421-7000
Designature and Typed OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Option Printed Name of Signific Printe R