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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 520484

(7)

FILED Mar 13 1997 8:00am Secretary of State

| Funcipal Flace 2001 BOMAR I PGA SQUARE | | Mailing Address 2001 BOMAR DRIVE PGA SQUARE PALM BEACH GARDENS | FL 33408-300 | 06 | | | | |
|---|---|---|--|--|---|-------------------------|-------------------------------------|--|
| | | | | | 3. Date Incorporated or Qualified 12/16/1976 | | e of Last 3/1996 | Report |
| | rape of Business | 2a. Mailing Address | ·· | | 4. FEI Number | 1 44, | 1 | applied For |
| Surto Apa | Marian Cara Cara Cara Cara Cara Cara Cara Ca | Suite Apt. #, etc. | | | 59-1709815 | | | lot Applicable |
| 2 Sarat Apa | # 500 | 27 | | | 5. Certificate of Status Desired | | | Additional Required |
| City & State | | City & State | | | 6. Election Campaign Financing | | \$5.00 |) May Be |
| 23 | | 28 | т | | Trust Fund Contribution | | | to Fees |
| - Ζφ ₊1 | Country | Zip | Count | ry | 8. This corporation has liability for | intangible t | | s. 199.032. |
| 4 | 9. Name and Address of Curre | 29 nt Registered Agent | 30] | | Florida Statutes 10. Name and Address of New Re | | | |
| HAR | ITMAN, NORMAN G. | | 8 | 1 Name | | · - | - | |
| 2001 | I BOMAR DRIVE | | 8: | 2 Street Ac | ddress (P.O. Box Number is Not Acceptal | ble) | | |
| PAL | M BEACH GARDENS FL 33408 | | | | | | | ···· |
| | | | 8: | 3 | | | | |
| | | | B | 4 City | | FL | 85 Zig | Code |
| 11. Eursuari i | to the provisions of Sections 607 050 | 02 and 607.1508, Florida Stati | utes, the abo | ve-named ci | orporation submits this statement for the p | purpose or a | Juanging | |
| agent Far SiÇINATURE | to the provisions of Sections, 607 055 egistered agent, or both in the State in familiar with, and accept the oblig three companions of egisteric transfers of agents. | jations of, Section 607.0505, F | Torida Statut | es. | orporation submits this statement for the pration's board of directors. I hereby acce | purpose or optithe appo | intment a | s registered |
| agent Far SiGNATURF 12. | ns familiar with, and accept the oblig Screen government of display star OF LCERS AN | jations of, Section 607,0505, f entraditional interest (NC ID DIRECTORS | Torida Statute It Registered A 13. | es. gunt signature re | | DATE CERS AND | DIRECTO | RS IN 12 |
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The county and use a regiment supplies of the control of supplier and accurate and accurate and that my signature shall have the same legal effect as if made under oath; that Leman of the conformation in the conformation or the conformation or the receiver of 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 allachment with an address

SIGNATURE: SIGNATURE AND TYPED OF PRINTED NAME OF

NORMANG. VARTMAN

0300687