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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 01 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

**DOCUMENT # 533747** 

(2)

SUSSM	AN ENTERPRISES	i, INC.	•									
Principal Place of Business Mailing Address						I DODANI MANDE TANDE TANDE TANDE MANDE MORA HARA MANDA						
2000 NE 5TH AVE 2000 NE 5TH AVE BOCA RATON FL 33431 BOCA RATON F												
								3. Date Incorporated or Qualified 05/11/1977		ate of Last F <b>/01/1996</b>	Report	
<u> </u>	lace of Business	<b>⊢</b> ¬	2a, Mailing Address					4. FEI Number		<del></del>	pplied For	
Suite, Apt.	# oto	26 Suite	26   Suite, Apt. #, etc.					59-1760539			ot Applicable	
22	π, ειc.	<del>}</del> 1	27				ļ	5. Certificate of Status Desired			Additional equired	
City & State	е		City & State				6. Election Campaign Financing		\$5.00	May Be		
23		28						Trust Fund Contribution			to Fees	
Ζιρ 	Country	· — — '	<del>                                      </del>		Country			8. This corporation has liability for intangible tax under s. 199.032,				
24	25 Name and Addre	29   sas of Current Registered	Registered Agent		30			Florida Statutes Yes No  10. Name and Address of New Registered Agent				
SUS	SSMAN, ARTHUR	AS OF CONTON TREGUES	- Agoni		81	Name		10. 11.11.0 21.0 7.0 4.0 2.0	9101010			
	O NE 5TH AVE				82	Stroot A	Addres	Idress (P.O. Box Number is Not Acceptable)				
	CA RATON FL 33431				<b>02</b>	Olibotr	100,00	doress (P.O. Box Number is Not Acceptable)				
					B3							
•					84 City				FL	<b>85</b> Zip	Code	
office of ragent. La SIGNATURE	on tamiliar with, and acc	in, in the State of Florida Sc cent the obligations of, Sec Communications of the interpretation of registered agent and title if appli- DEFICERS AND DIRECTOR	ction 607,0505, Fig.	orida Stat	iules 4	18514	W	ation submits this statement for the n's board of directors. I hereby accerding the statement of the stateme	DATE			
TITLE	PD	110210740001120101	DELETE	1.1 Ti	TLE	· · · · · ]		7,001110110701071010111	02.1071	Change	Addition	
NAME	Sussman, Arthu			1.2 N	AME							
STREET ADDRESS	2000 NE 5TH AVE			1.3 \$7	TREET	ADDRESS						
CITY - ST - ZIP	BOCA RATON FL				ITY-5	1-2IP						
TiffeE			☐ DELETE	2.1 TI		1				Change	☐ Addition	
NAME	•			22 N		LABBEAR		•				
STREET ADDRESS CITY-ST-ZIP				1		ADDRESS   ST-ZIP					:	
Title			DELETE	3.1 7		51-ZIF			· · · · · · · · · · · · · · · · · · ·	Change	Addition	
NAME			<del>_</del>	3.2 N/	AME					•	_	
STREET ADORESS				3.3 S	TREET	ADDRESS						
CITY+ST-2IP				3.4. C	ITY-S	ST - <b>Ž</b> IP		<u> </u>	_			
TITLE			DELETE	4.1 Tr	TLE					Change	Addition	
NAME				4. 2 N	AME			•				
STREET ADDRESS				4.3 S	TREET	ADDRESS						
CHY-ST-ZIP				4.4 CI	ITY-S	T-ZIP	···					
TITLE			DELETE	5.1 71	ITLE					Change	Addition	
NAME				52 N							ĺ	
STREET ADDRESS						ADDRESS						
C/TY-ST-ZIP			Decente.		ITY-S	T-ZIP				Change	Liddition	
TITLE			☐ DELETE	6.1 Ti		-				Change	Addition	
NAME Profes interes				6.2 N		IDDDGGG						
STREET ADDRESS				6.3 \$	THEET	ADDRESS						

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: 

Augustus Augustu