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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Mar 10 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 544418

(7)

Mailing Address

EBWAY CORPORATION

Principal Place of Business

8750 NW 21ST AVENUE FT. LAUDERDALE FL 33309			6750 NW 21ST AVENUE FT. LAUDERDALE FL 33309-1402									
							3	Date Incorporated or Qual 09/01/1977	lified 3	a. Date of L 02/20/18		eport
2. Principal Pl	lace of Business		2a. Mailing Address				4	I. FEI Number				plied For
21			26					59-1810092			No	Applicable
Suite, Apt # etc.			Suite, Apt. #, etc.				. Certificate of Status Desire		\$8.75 Additional Fee Required			
City & State			City & State			8	 Election Campaign Finance Trust Fund Contribution 		\$5.00 May Be Added to Fees			
23 Zip	Count		Zip Country				This corporation has liability for intangible tax under s. 199.032,					
24	25 29			30			"	Florida Statutes See No				
9. Name and Address of Current F						10	10. Name and Address of New Registered Agent					
E A	SENNETT% EBWA	CORPORATIO	N	.,,	81	Name						
6750 NW 21 AVE					82	Stroot A	ddroes ((P.O. Box Number is Not Acc	antable)			
FT LAUDERDALE, FL				82 Street Add) seamon	(P.O. BOX NUMBER IS NOT ACC	eptable)			
333					83							
000					0.4		· · · · · · ·		·····	TAFI	7in /	\
					84	City				FL 85	Zip C	Lode
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I aim familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.												
SIGNATURE	Signature, typed or printed har	no of registered agent an	d title if applicable (NO	TE Registe	ered Age	ent signature r	required who	en reinstating)	Ď	ATE		
12.	OFFICERS AND DIRECTORS				13.			ADDITIONS/CHANGES TO	OFFICERS	AND DIRE	CTOR	S IN 12
TITLE	S		☐ DELETE	1.1	TITLE					Ch	ange	Addition
NAME.	BENNETT, CATHE	RINE E		1.2	NAME							
STREET ADDRESS	1401 S OCEAN B	LVD		1.3	STREET	ADDRESS						
C-TY - ST - ZIP	POMPANO BEAC	H, FL 33064		1,4	CITY-S	IT-ZIP						Ì
THE	٧		DELETE	2.1	TITLE				***	☐ Ct	ange	Addition
NAME	BENNETT, ADELI-	IEID F		2.2	NAME							į
STREET ADDRESS	1401 S OCEAN B	LVD	2.3		2.3 STREET ADDRESS							
CITY - ST - ZIP	POMPANO BEAC	H, FL 33064		2.	4 CITY-	ST-ZIP				·		
TITLE	PT		☐ DELETE	31	TITLE					☐ Ct	ange	Addition
NAME	Bennett, Edwa			32	NAME	İ						
STREET ADDRESS	1401 S OCEAN B			33	STREET	ADDRESS						
CITY-ST-7IP	POMPANO BEAC	H, FL 33064		_	CITY-	SI-ZIP						
TIFLE			☐ DELETE	4.1	TITLE					L Cr	เลกติย	Addition
NAME				4. 2	2 NAME							
STREET ADDRESS				4.3	STREET	ADDRESS						
CITY-\$1-7:P	· · · · · · · · · · · · · · · · · · ·				CITY - S	T-ZIP						
1:TLE			☐ DELETE		TITLE					L,J Ch	ange	Addition
NAME					NAME			X.				
STREET ADDRESS						ADDRESS						ĺ
CITY+ST-ZIP			britte		CITY-S	it-zie			······			Addition
TITLE			☐ DELETE	- 1	TITLE	ļ				L. Ct	ange	L. Addition
NAME					NAME							
STREET ADDRESS						ADDRESS						l
CITY-SY-ZIP	w continue that the infere	nation purplied or	th this filing done not a re-		CITY-S		atad in C	Section 119.07(3)(i), Florida S	Statuton 14	further cortif	u that	the
informatio Lam an of	in indicated on this and flicer or director of the	nual report or support or the	plemental annual report is	true and wered to	d accu	urate and	that my s	signature shall have the sam required by Chapter 607, Flo	e legal eff	ect as if mai	de uno	der oath; that