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

PROFIT CORPORATION ANNUAL REPORT

1997

AFCG, INC.

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 559272

(0)

FILED Feb 24 1997 8:00am Secretary of State

Principal Place of Business Mailing Address										
Principal Place of Business 1704 NW BIST WAY N/A PLANTATION FL 33322		1704 NW BIST WAY N/A PLANTATION FL 33322-5425	1704 NW 81ST WAY N/A Plantation Fl 33322-5425							
U\$		US	US		3. Date Incorporated or Qualified 01/31/1978 3a. Date of Last Report 04/15/1996			eport ·		
2. Principat Pl	ace of Business	2a. Mailing Address 26				4. FEI Number 59-1964402		 	oplied For ot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	h			5. Certificate of Status Desired See Required Fee Required				
City & State	9	City & State	28			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zιρ	Country	Zip	Count	ry		8. This corporation has liability for i			. 199.032,	
24	25 9. Name and Address of		10			Florida Statutes 10. Name and Address of New Re		No		
MAG	RO, GEORGE	Culton Hegisteles Agent	8	1	Name	IV. Hallo and Address V. How he	Altraide L	Apin		
	NW 81 WAY		L	1						
	NTATION FL 33322		8	2	Street Add	ress (P.O. Box Number is Not Acceptab	le)			
			8	3		,	******		·	
			8	4	City		E I	85 Zip (Code	
office or n	egistered agent, or both, in th	e State of Florida. Such change was au e obligations of, Section 607.0505, Flori	rthorized I ida Statut	es.	the corporal	poration submits this statement for the pation's board of directors. I hereby acception when reinstables	urpose of the appo	changing it sintment as	is registered registered	
12.		RS AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTOR	IS IN 12	
TITLE	PD	DELETE	1.1 TITLE 1.2 NAME				·····	Change	Addition	
NAME	MAGRO, GEORGE									
STREE1 ADDRESS			1.3 STRE	1.3 STREET ADDRESS						
CITY - S1 - ZIP	PLANTATION FL		1.4 CITY		-2IP					
TITLE	☐ DELETE 2.1							L. Change	☐ Addition	
NAME			2.2 NAME							
STREET ADDRESS					ADDRESS	:				
CHTY-\$1-7IP	DELETE 3.1			_	T-ZIP	<u> </u>		Change	Addition	
NAME	321					•				
STREET ADDRESS					ADDRESS					
CITY-ST-7IP			3.4. CITY		1					
THLE	DELETE 4.1							☐ Change	Addition	
NAME			4. 2 NAM	IE.						
STREET ADDRESS			4.3 STRE	ET A	ADDRESS					
CITY-ST-ZIP			4.4 CITY	·sr	-ZIP					
TITLE		☐ DELETE	5.1 TITLE					Change	Addition	
NAME	li .		5.2 NAM							
STREET ADDRESS					ADDRESS					
CHTY - ST - ZIF		I DOLETE	5.4 CITY		-ZIP			Change	Addition	
TITLE		☐ DELETE	6.1 TITLE					☐ Change	אטטיייטווי נייי	
NAME OFFICE ABORDOR			6.2 NAM		1000ccc					
STREET ADDRESS					ADDRESS	•				
14. I do herel	by certify that the information s	supplied with this filing does not qualify	6.4 CITY for the ex			d in Section 119.07(3)(i). Florida Statute	s. I further	certify that	the	
informatio	on indicated on this annual rep	ort or supplemental annual report is tru	e and ac	cur	rate and that	at my signature shall have the same lega ort as required by Chapter 607, Florida S	l effect as	if made un	ider oath; that	