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 # 570495

(2)

PINE VALLEY OF PALM BEACH, INC.

FILED									
Mar 27 1997 8:00am									
Secretary of State									

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Principal Place of Business		Mailing Ad	Mailing Address			1 INDIAL STILL IN DER MUIST MINIM PRIME MILL	Aldi albii at	Nic Bider and	in minit illat	
4548 N FEDERAL HIGHWAY FORT LAUDERDALE FL 33308			4548 N FEDERAL HIGHWAY FORT LAUDERDALE FL 33308-5204							
							3. Date incorporated or Qualified 04/19/1978		e of Last 17/1996	
2. Principal P	lace of Business	2a. Mailing	Address	·,			4. FEI Number	1 3-14		Applied For
21		26					98-0040931			Vot Applicable
Suite, Apt.	#, etc		pt #, etc.							Additional
22		27					5. Certificate of Status Desired		Fee F	Required
City & Stal-	0	City & S	State				6. Election Campaign Financing		\$5.00	0 May Be
23		28					Trust Fund Contribution			d to Fees
Zip	Country	Zıp		Countr	y		8. This corporation has liability for i	ntangible t	ax under	s. 199.032,
24	25	29		30			Florida Statutes	Yes X	No	
	Name and Address of Current	ent Registered Ag	ent				10. Name and Address of New Re	gistered A	gent	
BISH	HINS, LARRY V.			81	1	Name				
	8 N FEDERAL HIGHWAY			82	2	Street Addre	ess (P.O. Box Number is Not Acceptab	le)		
FOR	RT LAUDERDALE FL 33308									
				83	3					
					╀	City				o Cod-
1				84	*	City		FL	85 Zip	p Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508,	Florida Statute	es, the abov	L √0-1	named corpo	oration submits this statement for the p	urpose of	changing	its registered
office or r	egistered agent, or both, in the States from the States and account the obline	te of Florida, Such	change was a	luthorized b	y ti	he corporation	ion's board of directors. I hereby acces	t the appo	intment a	is registered
	an term for white, and accopt the con	gadoris of, occubi	1007.0303,110	nica Statute						
SIGNATURE.	Signalize: typic For printed name of registered a	gent and the if applicable	e inote	: Registered Ap	gent	signature require	ed when reinstaling)	DATE		
12.	OFFICERS A	ND DIRECTORS		13.		 	ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTO	RS IN 12
TITLE	PTD		DELETE	1.1 TITLE					Change	Addition
NAME	DICK, ABE			1.2 NAME						
STREET ADDRESS	31 CHURCH STREET			13 STREE	ET AČ	DDAESS				
CHTY-ST-ZIP	ST. CATHARINES-ONTARIO-	CANAD L2R -3B	7	1.4 CITY	S1-	ZIP				
TITLE	VSD		DELETE	2.1 TITLE					Change	Addition
NAME	DICK, ERICA			2.2 NAME		ĺ				1
STREET ADDRESS	31 CHURCH STREET			2.3 STREE		DORESS				
CHY-S1-ZIP	ST. CATHARINES-ONTARIO-	CANAD L2R -3B	7	2. 4 CITY						
TITLE	with the second		DELETE	3.1 TITLE					Change	Addition
NAME		•		3.2 NAME				'		
STREET ADDRESS				3.3 STREE		DOBESS				
						·				1
CHY-ST-7/P TITLE	1		DELETE	3.4. CITY-		- £1F			Change	Addition
		•	Land Direction	4.1 THE					CHAINGE COM	tal Nation
NAME CARGET ADMINISTRA				4.2 NAM		nnnere				
STREET ADURESS										i
COY-S1-ZIF			DELETE	4.4 CITY -		til.		<u></u>	Change	Addition
TITLE		ļ	L. DULKIE	5.1 TITLE				l	1 CUMUND	MODITION .
HAME				5.2 NAME						
STREET ADDRESS				5.3 STREE		ĺ				
City-St-7-P			DELETE	5.4 CITY-	_	ZIP			Channe	A statistica -
TITLE			DELETE	61 TITLE					Change	Addition
NAME				62 NAME	-					
STREET ADDRESS				6.3 STREE	ET A	DORESS				
CITY ST-ZIP			,, 	6.4 CITY-			1 0 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4			
44 I do bocol	his acidific that the information our of	and with this filing t	tilava sasab	L. Far tha au	-	Indian atotad	In Section 110 07(2)(i) Florida Statuto	a I from the ar	andifu the	at the

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 reveiver 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:

GNATURE AND RED COPPHINTED NAME OF AGNING OFFICE

Mas 18-97

205-492-930B