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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 572912

(4)

Mailing Address

EDEN UNITED, INC.

Principal Place of Business

FILED
May 15 1997 8:00am
Secretary of State

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	13 ILE FL 33310-5403	P.O. BOX 5403 FT. LAUDERDALE FL 3331	0-5403					
US		US			3. Date Incorporated or Qualified 06/19/1978	3a. Date of Last R 05/01/1996	eport	
2. Principal P	lace of Business	2a. Mailing Address			4, FEI Number		plied For	
21		26			59-1863211		t Applicable	
Suite, Apt	#, etc	Suite, Apt. #, etc.	······································		Certificate of Status Desired	□ \$8.75	Additional	
22		27			6. Certificate of Status Desired	Fee Re	equired	
City & State	6	City & State			6. Election Campaign Financing	\$5.00		
23 Zip	Country	Z ip	Coun		Trust Fund Contribution	Added Added		
24	25	29	30	uy	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes			
<u> </u>	9. Name and Address of Cu		1301	··· ··· ··· ··· ···	10. Name and Address of New Reg			
LEV	AN, ALAN B.			Name		·		
1750	DE. SUNRISE BLVD., 3RD F	LOOR	-	P Street Add	trans (P.O. Roy Number is Not Assentable	.,		
FT. LAUDERDALE FL 33304				82 Street Address (P.O. Box Number is Not Acceptable)				
			∫€	3				
			-	14 City		85 Zip i	Code	
	·			1		FL		
11. Pursuant office or r	to the provisions of Sections 607 egistered agont, or both, in the 5	'.0502 and 607.1508, Florida Statut State of Florida. Such change was :	es, the abo authorized	ove-named corp by the corpora	poration submits this statement for the pution's board of directors. I hereby accept	rpose of changing it the appointment as	s registered registered	
agent La	m lamiliar with, and accept the o	obligations of, Section 607.0505, Fl	orida Statu	tes.	, , , , , , , , , , , , , , , , , , , ,			
SIGNATURE	Styrning is specifier printed name of register	Alon	C foresterna		red when rainstating)	DATE		
12.		S AND DIRECTORS	18,	agent signature requi	ADDITIONS/CHANGES TO OFFICE		S IN 12	
TRICE	PD	DELETE	1.3 TiTL	F 1	ADDITIONS/OFFARES TO OFFICE	☐ Change	Addition	
NAME	LEVAN, ALAN B.		1,2 NAM	-			4.2	
STREET AUDRESS 1750 E. SUNRISE BLVD., 3RD FLOOR				ET ADDRESS				
C/TY-S1-ZIP	ft. Lauderdale fl			-ST-74P				
THEF	VIS	DELETE	2.1 TITL			☐ Change	Addition	
NAME:	GILBERT, GLEN R. 22			IE I				
STREET ADDRESS	1750 E. SUNRISE BLVD., 3RD FLOOR			EET AODRESS			ı	
COTY - ST - ZIP	FT. LAUDERDALE FL		2. 4 CiT	r-st-zip				
THE		DELETE	3.1 TITL	E	· ·	Change	Addition	
NAME:			3.2 NAM	E				
STREET ADDRESS				ET ADDRESS				
C(1Y+\$1+7IP	F P S S S S S S S S S S S S S S S S S S	☐ DELETE	3.4. CIT	r-ST-ZIP		T Chance	17 100000	
THUE NAME		f" nereit		· i		L Change	Addition	
NAM: STREEL ADDRESS			4. 2 NAM	ALE EET ADDRESS				
CHY-S1-7IP				-ST-ZIP				
Tillé		DELETE	5.1 TiTL			Change	Addition	
NAM ^c			5.2 NAM					
STREET ADDRESS				ET ADDRESS			Ì	
City-St-7iP				-ST-ZIP				
TIDLE		DELETE	6.1 TITL	·····		Change	Addition	
NAME			6.2 NAM	IE				
STREET ADDRESS			6.3 STA	EET ADDRESS				
CHY+S1+7(P			6.4 CITY	- ST-21P				
14 I do nerel	by certify that the information sur	solied with this filling does not quali	fy for the e	venntion state	d in Section 119 07(3)(i) Florida Statutes.	I further certify that	the	

I. I do nereby 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:

IGNATURE AND TYPED

Scalor Vice President

4/30/97 954-