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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 15 1997 8:00am

Secretary of State

MARCH 31/97 416-496-4270

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997
DOCUMENT #

573269

(8)

MEANINGFUL INVESTMENTS CORPORATION

	of Business	Mailing Address	<del></del>						
Principal Place of Business  ** JOSIAS & GOREN. P.A.  3099 E. COMMERCIAL BLVD #200  FT. LAUDERDALE FL 33308		% JOSIAS & GOREN. P.A. 3099 E. COMMERCIAL BLVD #200 FT. LAUDERDALE FL 33308-4395							
						3. Date Incorporated or Qualified 05/17/1978		ite of Last R 10/1996	eport
2. Principal Place of Business		2a. Mailing Address 26				4. FEI Number 59-1878804		<u> </u>	oplied For
Suite, Apt. #, etc.		Suite, Apl. #, etc.				5. Certificate of Status Desired		\$8.75	ol Applicable Additional
City & State		27 City & State						Fee Re	_'
3	,	28				<ol><li>Election Campaign Financing Trust Fund Contribution</li></ol>		\$5.00 Added t	
Zip	Country	Zip	Count	try		8. This corporation has liability for			. 199.032,
4	9. Name and Address of Curi	29 rent Registered Agent	30]			Florida Statutes  10. Name and Address of New Re		S No Agent	
GOF	REN, SAMUEL S.			31 N	Vame				·
3099 E. COMMERCIAL BLVD			8	32 5	Street Addr	ess (P.O. Box Number is Not Accepta	blo)		
#200 FT. LAUDERDALE FL 33308			8	83					
F1+1	ENDERDALL I C 33300				City			85 Zip (	Code
					•		FL		
agent. I ar	to the provisions or Sections 607.0 sgistered agent, or both, in the Standardent familiar with, and accept the ob-	and 607.1508, Florida Statuate of Florida Such change was ligations of, Section 607.0505, Fl	ies, the abd authorized orida Statul	ove-n by th tos.	amed corp ie corporati	oration submits this statement for the ion's board of directors. I hereby acce	purpose of pt the appo	changing it sintment as	.s registered registered
SIGNATURE	Signature, typed or printed name of registered	agont and tire if applicable (NO	L Registered	Agent 8	signature require	ed when reinstating)	DATE		
12.		AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFI	CERS AND	DIRECTOR	
TITLE	PST	☐ DELETE	1.1 1 70	F				Change	☐ Addition
NAME	GREEN, HAROLD 2201 NW 30TH PL	NI .							
STREET ADDRESS	POMPANO BCH FL	1		EFT ADI	ì				
CITY-ST-ZIP TITLE	D	DELETE		1.4 CHY-ST-7/P 2.1 TILE				Change	Addition
NAME	GREEN, HAROLD			2.2 NAME 2.3 STREET ADDRESS				E Ononge	
STREET ADDRESS	2201 NW 30TH PL								
CITY-ST-ZIP	POMPANO BCH FL		2. 4 CIT	2.4 CITY-ST-ZIP 3.1 TITLE					
TITLE		□ DELETE	3 1 TITL					Change	Addition
NAME			3.2 NAM	ΑE					
STREET ADDRESS			3 3 STRI	EET ADI	DRESS				
CITY-ST-ZIP TITLE		DELETE	3.4. CITY 4.1 TITL		ZIP .			Change	Addition
NAME		Lad Dett It	4.1 THE					L. Change	☐ Addition
STREET ADDRESS			4.3 STR		ORESS				
CITY-ST-ZIP			4.4 CITY						
TITLE		DELETE	5.1 1(1)					Change	Addition
NAME			5.2 NAM	AE.					
STREET ADDRESS			5.3 \$TR	ICA 113	DRESS				
CITY-ST-ZIP			5.4 CH Y		/IP				···
TITLE		☐ DELETE	61 THE		-			Change	Addition
NAME			6.2 NAM						
STREET ADDRESS			6.3 STRI						
CITY-ST-ZIP	ov certify that the information summ	lied with this filing does not qual	6.4 CITY ifv. for the e			I in Section 119.07(3)(i), Florida Statute	es. I further	certify that	the
Informatio	n indicated on this annual report of	or supplemental annual report is nor the receiver or trustee empor l, or on an attachment with an ad	true and ac vered to ex	ccura	te and that	my signature shall have the same leg t as required by Chapter 607, Florida	al effect as	if made un	der oath, that