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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

POMPANO BCH FL 33069



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 620324

(4)

POMPANO BCH FL 33069-4501

ADVANCED MOBILEHOME SYSTEMS, INC.

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Mailing Address

941 SW 8TH ST

FILED Apr 14 1997 8:00am Secretary of State

3a. Date of Last Report

02/07/1996

3. Date Incorporated or Qualified

04/26/1979

<u> </u>	Principal P	Place of Business 2a, Mailing Address									4, FEI Number 59-1877322		}	oplied For
21	Suite, Apt.	26 Suite, Apt. #, etc.												ot Applicable Additional
22	•										5. Certificate of Status Desired			equired
二	City & Stat	0			City & State)					6. Election Campaign Financing			Мау Ве
23	7:0		T - 6	28						4	Trust Fund Contribution			to Fees
24	Zip		Country [25]	20	7φ]		Cour 30	ritry			This corporation has liability for Florida Statutes	r intangible : Yes [: 199.032,
[24] [25] [29] [30] 9, Name and Address of Current Registered Agent									_J.	10. Name and Address of New R				
MURRAY, JOHN E							81	Name					· · · · · · · · · · · · · · · · · · ·	
941 SW 8TH ST							82	Street Addr	1085	s (P.O. Box Number is Not Accepta	ible)			
POMPANO BCH FL 33069														
							83							
l							f	84	City				85 Zip i	Code
									nonad as		otion as broits this statement for the	<u> </u>	honsine "	la sociatora d
11	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 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.													
	•	m) tamillar w	ith, and accept the ob-	igations o	or, Section 60	7.0505, FRO	nda Statu	лов	i.					
SIC	GNATURE	Signature, typed	for printed name of registered a	gent and Ul	le it applicable.	(NOIL	Registe ea	Age	nt signature requir	ed w	when reinstating)	DATE		
12			OFFICERS A	ND DIRE	C10RS		13.				ADDITIONS/CHANGES TO OFFI	CERS AND	DIRECTOR	RS IN 12
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14.	I do hereb	y certify tha	t the information suppl	ied with the	his filing doos	not qualify	/ for the ε	1.91	nption stated	in	Section 119.07(3)(r), Florida Statute	es. I further	certify that	tho
	14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(r), 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 of the receiver or drustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if charged, or on an attachment with an address.													

John E. Murray

4-9-97

954-782-0951