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

* PROFIT **CORPORATION ANNUAL REPORT**



LLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

	1997		DIVISION OF CORPORATIONS					Score	tary (JI)	iaic	,
DOCUI 1. Corporation		# 641449 CTION CORPEAS	(4)										
											H ein in	i i i i i i i	
Principal Place	e of Business		Mailing Address				-						
7777 GLADES ROAD BOCA RATON FL 33434			7777 GLADES ROAD BOCA RATON FL 33434-4111										
	12 00 101		00011	****				Date Incorporated or Qualit	ied 3a. Da	to of I	ool D.		
								10/04/1979		04/19		:port	
Principal Place of Business 1			2a. Mailing Address				4.	FEI Number 59-1966292	,	T		plied For t Applicat	210
Suite, Apt.	#, etc.		Suite, Apt. #, etc.				+-			\$8.		dditional	Jie
22			27				5.	Certificate of Status Desired	. LJ			quired	
City & State	е		City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees						
Zip		Country	Zip	Cou	Country			This corporation has liability	for intangible	tax un			
24	25 29 29 S. Name and Address of Current Registered Agent			30	30			Florida Statutes Name and Address of New		No			
UNI		CORPORATION CO		.	81	Name		Hamo and Padress of Ho	i Hogistorou i	·goin			
110	NORTH MAI	SNOLIA STREET			82	Street Add	iress (P	O. Box Number is Not Acce	eptable)				
TAL	LAHASSEE F	L 32301		ļ	83								
				ŀ	84	City				TAET	7:- 7		
- ,			· · · · · · · · · · · · · · · · · · ·						FL	85	Zip C		
11. Pursuant t	to the provision egistered ager	ns of Sections 607,0502 nt, or both, in the State o	and 607,1508,1 lorida Stati if Florida. Such change was ions of, Section 607.0505, F	utes, the at authorized	oove d by	e-named corpora	poration ation's b	n submits this statement for loard of directors. I hereby a	the purpose of accept the app	chang ointme	ing its	, registere registered	ed i
SIGNATURE	ili l a lilililar v alis	, and accept the obligation	ions of, Section 607:0505, r	TOHUA SIAI	uies	S.							ļ
	Signature, typed or	printed name of registered agent OF FICE RS AND			agA b	nt signatura requi			DATE DATE	DIDE.		0.161.40	_
12. TITLE	VSD	OFFICING AND	DETETE	13. 1.1 10	115			ADDITIONS/CHANGES TO C	FFICERS AND	Ch		S IN 12 Additi	ion
NAME	West, Ali			1.2 N	AME	ĺ							
STREET ADDRESS		DES ROAD #410				ADDRESS							
CITY-ST-ZIP TITLE	BOCA RAT	ON FL	DELETE	1.4 CF 2.1 10		T - ZIP				Ch	ange	Additi	ion
NAME	WIENER, E	LLIOTT M		2.2 N							·		
STREET ADDRESS		DES ROAD #410		2.3 ST	REE 1	ADDRESS							
CITY-ST-ZIP TITLE	BOCA RAT	ION FL	DELETE	2 4 C 3 1 TU		ST - ZIP				☐ Ch	2006	Additi	inn
NAME	SLEEK, HA	VRR Y		3 2 N/		1				_,	, ingo	LL) Noon	-
STREET ADDRESS		DES ROAD, SUITE 41	0	3351	ALEI	ADDRESS							
CITY-ST-ZIP	BOCA RAT	ON FL	DELETE			S1 - 7IP				☐ Ch		Additi	
TITLE NAME	TASD Hoyos, J	FFERFY	LJ britit	, 4.1 TI 4.2 N		1				ᅡ	ange	L_J ADOM	ווט.
STREET ADDRESS		DES RD. #410		1		ADDRESS							
CITY-ST-ZIP	BOCA RAT	ON FL	DE: ex-	4.4 CI		1 - ZIP							
NAME	V Armstro	NG JOEL	DELETE	5.1 10 5.2 N/						☐ Ch	ange	Additi	.on
STREET ADDRESS		DES ROAD, SUITE 41	0			ADDRESS							
CITY-ST-ZIP	BOCA RAT			5.4 CI									
TITLE	V	TOM	DELETE	6.1 10						☐ Ch	ange	Additi	10n
NAME STREET ADDRESS	DAMIANO,	TOM DES ROAD, SUITE 4º	10	6.2 NA		VDUBECO							
CITY OF THE	ROCA RAT		•	5.3 81	ntt.l	ADDRESS							

14. 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 of supplymental 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 find 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 only apply chapter 607.

SIGNATURE:

bfferthurssyp althat 511-482-5100

FILED

Mar 14 1997 8:00am