## 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** 

1. Corporation Name 648725 (0)						
INDIAN	INVESTMENTS INCORPORA	ובט		j polika addi anda irah ibah kaba k		
Principa! Plac	e of Business	Mailing Address		4 188110 01111 BYOR 10111 10111 10111 1	IIII BIBLI BIBLI BIBLI BIBLI BIBLI BIBLI BIBLI	
600 N CONGRESS STE 13009 DELRAY BEAHC FL 33455		600 N CONGRESS STE 13009 DELRAY BEAHC FL 33445-3429				
US	10 TE 90100	US	*	3. Date Incorporated or Qualified	1	
<ul> <li>Principal P</li> </ul>	Place of Business	2a, Mailing Address		12/19/1979 4. FEI Number	04/16/1996 Applied For	
	5.W. 14 PL.	26 31915.W. 14	" PL	59-1979695	Not Applicable	
Suite, Apt.	#, etc. / 3	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State  28 Boyn Ton Breach, 154.		6. Election Campaign Financing	\$5.00 May Be	
23 100 y	NTON BEACH, FL Country		Country	Trust Fund Contribution  a, This corporation has liability for		
24 33.	476 25	29 33426	30	Florida Statutes	Yes No	
	g. Name and Address of Current	Registered Agent		10. Name and Address of New F	legistered Agent	
600 STE	UNO, MELBA R ) N CONGRESS E 13009 LRAY BEACH FL 33455		82 Stre	81 Name  82 Street Address (P.O. Box Number is Not Acceptable)  7 / 7 / 5 / 1/4		
UEL	LRAT BEAUTI FL 33433		84 City	BOYNTON BENCH 1-6	85 Zip Code	
44 Puge cont	to the provisions of Sections 607.05/02	and 607 1508 Florida Statut	as the above nam	BOYNTON DEARH.	FL 334-8	
office or r agent. Fa	registered agent, or both, in the State of the familiar with, and accept the obligations.	of Florida. Such change was a tions of, Section 607.0505, Flo	authorized by the corida Statutes.	ed corporation submits this statement for the orporation's board of directors. I hereby acc	ept the appointment as registered	
SIGNATURE	Signature, typed or printed name of registered agen	t and title if annicable (NOT)	F. Reg stered Agent situs	ure required when reinstating)	DAYE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFF		
TITLE	PD	☐ DELETE	1.1 TOTLE		∑ Change ☐ Addition	
NAME	BRUNO, ANTHONY O.		1.2 NAME	b 771	i a	
STREET ADDRESS	600 CONGRESS		1.3 STREET ADDRES		١	
CITY - ST - ZIP	DELRAY BEACH FL		1.4 CITY-ST-ZIP	BOYNTON, BEACH FL	33426	
TITLE	VD .	☐ DELETE	2.1 TITLE	•	Change Addition	
NAME	BRUNO, MELBA R		2.2 NAME	The Pl	l.	
STREET ADDRESS	600 N CONGRESS		2.3 STREET ADDRES	s 31915 w 144 PL	7 33604	
CITY-ST-ZIP	DELRAY BEACH FL	DELETE	2 4 CITY-ST-ZIP 31 TITLE	BOYNTON BEACH, F	Change Addition	
FIFLE	S SOUND APPLICATION	L DECENT	1	_	Carpinality C Accioni	
NAME	BRUNO, MELBA R		3.2 NAME	s 315, 5, w. 14 Ph	C	
STREET ADDRESS	600 N CONGRESS		3.3 STREET ADDRES	BOYNTON BEROH FI	3344	
CHTY - ST - ZIP TITLE	DELRAY BCH FL	DELETE	3.4. CITY-ST-ZIP 4.1 TITLE	(304 N 1 D 1 JEN 0 14 1 1 1	☐ Change ☐ Additic	
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRES	8	. • - 18	
CITY-ST-ZIP			4.4 CITY-ST-ZIP	9	Î#	
THEE		DELETE	5.1 TITLE		Change Addition	
NAME		*****	52 NAME			
STREET ADDRESS			5.3 STREET ADDRES	s		
CITY-ST-ZIP			5.4 CITY - ST - ZIP			
TITLE		DELETE	6.1 TITLE		Change Addition	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRES	s		
CHTY - ST - ZIF	*		6.4 CITY - ST - ZIP			

14. I do hereby certify that the information supplied with this fiting 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,

SIGNATURE:

**FILED** 

May 08 1997 8:00am

Secretary of State