## 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

DOCUMENT # 654343

(3)

BALA CAPITAL CORP.

FILED Apr 15 1997 8:00am Secretary of State



SOUR LAS CARS BLVD   SURE 100   FT. LAUDEROME FL 33001-3248   US   SURE 100   FT. LAUDEROME FL 33001-3248   US   SURE 100   FT. LAUDEROME FL 33001-3248   SURE 100   FT. LAUDEROME FL 33001-3248   SURE 100   S	Principal Pla	ice of Business	Ma	Mailing Address				1,00000 0000 0000 0000 0000	#1#11 #1#11 B1	.,, 4.0	1 47411	
File   Description   File   Description   File   Description   Descrip	200 E. LAS OLAS BLVD											
US  2. Frice(sa) Face of Bunness 2. A Mailing Address 2. Place of Bunness 2. A Mailing Address 2. Bunness 2. Solit. Apr. 8. cto:    Duile, Apr. 8. oto   Solit. Apr. 8. cto:   Duile, Apr. 8. oto   Solit. Apr. 8. cto:   City & Solit.												
2.   Principial Pistor of Eurorices   2a. Maring Address   3c. Maring Address   4c. FEI Number   5c-0027512     3c. Appeted For   5c. Apr. 4 (vic.   2c.		DALE FL 33301			301-2248				· · · · · · · · · · · · · · · · · · ·			
Solitic April 6, rec	US		U	US ·								
Substitution	2. Principal	Place of Business	2a.	Mailing Address	·······			4. FEI Number		T	Αp	plied For
Substitution	21		26					65-0027512			No	Applicable
Chy & State     City & State   City & State     City &				Suite, Apt. #, etc.						\$8.	75 A	dditional
Country   28     Country   29   Co	22		27					Certificate of Status Desired		F	ee Re	quired
28		ate		City & State				6. Election Campaign Financing		\$5	.00	May Re
Zip	23		28									
28					Zip Gountry			8. This corporation has liability for it	ntangible t	ax un	der s.	199.032.
FRED FRANKEL 883 SW 18TH ST.,#M-110 BOCA RATON FL 33433  82 Street Address (P.O. Box Number is Not Acceptable)  83 City  84 City  85 Zip Code  85 Zip Code  86 City  86 City  87 L	24	25			30							
B8S W 18TH ST.,#M-110 BOCA RATON FL 33433  B8 Sireer Address (P.O. Box Number is Not Acceptable)  B8 Sireer Address (P.O.	L	9. Name and Address of Curren		tered Agent	1			10. Name and Address of New Re-	stered A	gent		
B853 SW 18TH ST.,#M-110 BOCA RATON FL 33433  B2 Sireet Address (P.O. Box Number is Not Acceptable)  B3 B3 B4 City FL 85 Zip Code  11. Pursuant to the provisions of Sectors 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Forida Schot-brange was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent in formfail with, and except the obligations of. Section 607.0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent in formfail with, and except the obligations of. Section 607.0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent and except the obligations of. Section 607.0505, Florida Statutes.  SIGNATURE  12.	FA	REN FRANKFI				B1	Name					
BOCA RATON FL 33433    B4					-							· · · · · · · · · · · · · · · · · · ·
### City ###   ###	1					62	Street Add	iress (P.O. Box Number is Not Acceptab	l <del>o</del> )			
### City ###	, DC	DON PATON PL 33433			F	83				· · · · · · · · · · · · · · · · · · ·		***************************************
P.L. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutos, the above-named corporation submits this statement for the pursose of changing its registered agent. I per florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I per florida Statutos.    SIGNATURE						٦٠						
11. Presuant to the provisions of Sectors 607-0502 and 607 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607-0505, Florida Statutes.  SIGNATURE  Spring injury of park of name of legistered agent and title / apolitable  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  11. INITE  DS  FRANKEL, HENRIETTA  883 SW 18TH ST.,#M-110  BOCA RATON FL  P  FRANKEL, FRED  BOCA RATON FL  P  FRANKEL, FRED  BOCA RATON FL  DELETE  11 TITLE  Change  Addition  Addition  SIRELE ADDRESS  CITY-S1-2IP  DELETE  11 TITLE  Change  Addition  Addition  SPEIER, WILLIAM F., JR  22 NAME  SPEIER, WILLIAM F., JR  225 MICKORY ROAD, 150  PLYMOUTH MEETING PA  Addition  DELETE  11 TITLE  Change  Addition  Addition  Addition  Addition  Addition  Addition  Addition  Addition  Change  Addition  Addition  Addition  Addition  Addition  Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  INTEL  Change  Addition  Addition  Addition  Addition  Addition  Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  INTEL  Change  Addition  Addition  Addition  Addition  Addition  Addition  Addition  Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  INTEL  Change  Addition  Addition  Addition  Addition  Addition  Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  INTEL  Change  Addition  Addition  Addition  Addition  Addition  Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  INTEL  Change  Addition  Addition  Addition  Addition  Addition  Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Addition  Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  ADDI	[				Ţ.	84	City		771	85	Zip (	ode
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 under the foliations of. Section 607.0505, florida Statutes.  SIGNATUTE  12.										ᆜ		
SIGNATURE  12. OF FICE RS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  THE BRANKEL, HENRIETTA  SISTERI ADDRESS  CITY-SI, ZP  ITHE  P DELETE  TITHE  PRANKEL, FRED  883 SW 18TH ST., #M-110  8833 SW 18TH ST., #M-110  8834 SW 18TH ST., #M-110  8835 SW 18TH ST., #M-110  10 Change Addition  11 Change Addition  11 Change Addition  12 SW MAR  13 SIRET ADDRESS  13 SIRET ADDRESS  14 CITY-ST-ZIP  11 CHANGE ST. ADDRESS  15 CITY-ST-ZIP  17 CHANGE ST. ADDRESS  18 CITY-ST-ZIP  18 CHANGE ST. ADRESS  18 CITY-ST-ZIP  18 CHANGE ST. ADDRESS  18 CITY-ST-ZIP  18 C	11. Pursuan	it to the provisions of Sections 607.050 registered agent, or both, in the State	12 and 6 of Floria	07.1508, Florida Stati da: Such change was	utes, the ab sauthorized	OV6	e-named corporate the corporate	poration submits this statement for the pi ition's board of directors. I bereby accep	urpose of o	chang intme	ing it: nt as	s registered registered
NOTE   Regulatered Appent signature required when clinicating)   DATE	agent. I	am familiar with, and accept the obliga-	ations o	f, Section 607.0505, F	Florida Statu	tes	3.	,				
THE DS GREAT AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  THE DS GRANKEL, HENRIETTA 12	SIGNATURE											
THE MANY FRANKEL, HENRIETTA 6853 SW 18TH ST.,#M-110 BOCA RATON FL 12 MANE 9RANKEL, FRED 6853 SW 18TH ST.,#M-110 BOCA RATON FL 22 NAME 9RANKEL, FRED 6853 SW 18TH ST.,#M-110 BOCA RATON FL 22 NAME 9RANKEL, FRED 6853 SW 18TH ST.,#M-110 BOCA RATON FL 22 NAME 23 STREET ADDRESS 9ROCA RATON FL 24 CITY-ST-ZIP 9RANKEL STREET ADDRESS 9ROCA RATON FL 24 CITY-ST-ZIP 9RANKEL STREET ADDRESS 9RANKE 32 NAME 32 NAME 32 NAME 32 NAME 32 NAME 32 NAME 34 CITY-ST-ZIP 9RANKEL ADDRESS 9RAME 42 STREET ADDRESS 9RAME 42 STREET ADDRESS 9RAME 42 STREET ADDRESS 9RAME 42 STREET ADDRESS 9RAME 53 STREET ADDRES						Age	nt signature requi					
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14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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:

GNATURE AND VPED OR PRINTED NAME OF

GNING OFFICER OF DIRECTOR

4-10-9

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