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

**PROFIT CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## 1997 DOCUMENT # 657714

(2)

Sec	retar	y or	State

**FILED** 

May 13 1997 8:00am

Principal Place of Business Mailing Address  541 SOUTH STATE ROAD SUITE #4  MARGATE FL 33368-1711 MARGATE FL 33368				•					
US		U\$			· · <del></del>	3. Date Incorporated or Qualified 03/03/1980		te of Last Report <b>8/1996</b>	
Principal Place of Business     The Principal Place of Business		2a. Mailing Address			4. FEI Number Applied For 59-1982706 Not Applied				
Suite, Apt. #, etc.		Suite, Apt #, etc.			5. Certificate of Status Desired		\$8.75 Additional Fee Required		
City & State		City & State			6. Election Campaign Financing		\$5.00 May Be		
Zip	Country	28 Zip	Country	,— ,		Trust Fund Contribution	intensible	Added to Fees	
25		29	30		·· <del>·</del>	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No  10. Name and Address of New Registered Agent			
BOCI	<ol> <li>Name and Address of Current</li> <li>KHOLD, H. J.</li> </ol>	it Hegistered Agent	81	Na:	ne	10. Name and Address of New He	gistered	Agent	
	N.W. 82ND TERRACE		82			fress (P.O. Box Number is Not Acceptable)			
	KLAND FL 33087		02	Sue	.et Addre	ss (P.O. Box Number is Not Acceptat	леј		
			83						
			84	City	<del></del>		FL	85 Zip Code	
SIGNATURE  12. TITLE	Maure, hypertal unled name of reassared age OFFICERS AN	cklaed H.	ปี่	ه د	H Ko	and tween reinstation;)  ADDITIONS/CHANGES TO OFFICE	DATI	DIRECTORS IN 12  Change Addition	
NAME STREET ADDRESS	BOCKHOLD, JULIENNE R. 7373 N.W. 82ND TERRACE PARKLAND FL		1.2 NAME 1.3 STREET	ADDRE	ss				
CITY-ST-ZIP TITLE	M	DELETE	2.1 THE	31 - 7IP				Change Addition	
NAME STREET ADDRESS	BOCKHOLD, H.J. 541 S. STATE ROAD 7, SUITE MARGATE FL 33068-1711	4	2.2 NAME 2.3 STREET		ss				
CITY-ST-ZIP TITLE	WWW.CATE I E GOODS TITT	DETETE	3 1 TITLE	51 · ZIF				Change Addition	
NAME			3 2 NAME		}				
STREET ADDRESS			3 3 STREET		SS				
CITY-ST-ZIP TITLE		DELETE	3.4. CITY : 4.1 TITLE	St - 7 2				☐ Change ☐ Addit of	
NAME			4. 2 NAME						
STREET ADDRESS			4.3 \$1REFT	ADDRE	ss				
CITY-\$1-ZIP		District	4.4 CITY - S	51 - ZIP				The state of the s	
TITLE NAME		∟ DELETE	5 1 TOLE 5 2 NAME					Change Addition	
STREET ADDRESS			5.3 STREET	ADDRE	SS				
CITY-ST-ZIP			5.4 CHY-S	31 - ZIP					
TITLE		☐ OELETE	6 1 TITLE					Change Addition	
NAME STREET ADDRESS			6 2 NAME	LADSes					
CITY-ST-ZIP			6 3 STREET 6 4 CH Y - S		32				
14. I do heret informatio I am an o	o indicated on this appeal report or s	supplemental annua! report is tru the receiver or trustee empowe	for the exc ie and acco red to exec	emptic urate cute th	and that r iis report	in Section 119.07(3)(i), Florida Statute ny signature shail have the same logi as required by Chapter 607, Florida 9 • Bockhald	al effect as	dif made under eath di	

PRESIDENT