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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 660507

101

FILED Apr 18 1997 8:00am Secretary of State

1. Corporation Name BRUCE M. STANO & COMPANY P.A. Principal Place of Business 11910 N.W. 14TH STREET PEMBROKE PINES FL 33026 Mailing Address 11910 N.W. 14TH STREET PEMBROKE PINES FL 33026						
				3. Date Incorporated or Qualified 05/09/1980	3a. Date of Last F 05/01/1996	Report
2. Principal	Place of Business	2a. Mailing Address 26	18 t 18 g	4. FEI Number 59-2018868	- 	pplied For ot Applicable
Suite, Ap	l #, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75	Additional
City & St	ale	City & State		Election Campaign Financing		equired May Be
3		28		Trust Fund Contribution		to Fees
Žip Π	Country	Zip (29)	Country	This corporation has liability for Florida Statutes	intangible tax under s	199.032
<u> </u>	9. Name and Address of Curre		[30]	10. Name and Address of New Re		
ST	ANO, BRUCE M.		81 Name			
	010 N.W. 14TH ST.		82 Street Ad	Idress (P.O. Box Number is Not Acceptal	ble)	
PE	MBROKE PINES FL 33026				· · · · · · · · · · · · · · · · · · ·	*
			83			
:			84 City		FL 85 Zip	Code
agent I	am familiar with, and accept the obli	igations of Section 607.0505, I	s authorized by the corpor Florida Statutes.	orporation submits this statement for the pration's board of directors. I heraby acce	ipt the appointment as	s registered
SIGNATUHE	Signature typica or printed name of registered a OFFICERS A	ignit and life it applicable (NO NO DIRECTORS	DTE. Registered Agent signature rec		DAYE CERS AND DIRECTO	RS IN 12
SIGNATUHE 12.	Signature: typical or printed name of registered a	gent and trie if applicable (NC	DTE. Registered Agent signature red 13. 1.1 TITLE	quired when reinstating)	DATE	RS IN 12
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information indicated on this annual report is frue and accurate and that my signature shall have the same legal effect as if made under oath; that Larn an officer or director of the corporation of the c

SIGNATURE:

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR