## 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 # 689687

687 (2)

625 CORPORATION

Principal Place of Business Mailing Address HENDERSON, ROBERT, P. HENDERSON, ROBERT, P. 1619 JACKSON STREET 1619 JACKSON STREET FT. MYERS FL 33901 FT. MYERS FL 33901-2012					
US		U\$		<ol><li>Date Incorporated or Qualified 09/30/1980</li></ol>	3a. Date of Last Report 04/26/1996
2. Principal P	lace of Business	Jon ATHAN	CHAIT	4. FEI Number 59-2070370	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt, #, etc.			\$8.75 Additional
City & State	e	City & State	_	6. Election Campaign Financing	Fee Required\$5.00 May Be
23 Zip	Country	28 MONTREA.	Country	Trust Fund Contribution	Added to Fees
24	25	29 H3Y1B3 3	CANADA	8. This corporation has liability for i	Yes 🛂 No
9. Name and Address of Current Registered Agent HENDERSON, ROBERT P  81 Name				10. Name and Address of New Re	gistered Agent
	JACKSON STREET		82 Street Address (P.O. Box Number is Not Acceptable)		
FOR	T MYERS FL 33901			Too (170. Downtonion to 1701 too option	
			83		
			B4 City		FL 85 Zip Code
11. Pursuant office or r agent La	to the provisions of Sections 60 registered agent, or both, in the an familiar with, and accept the	7.0502 and 607.1508, Florida Statutes State of Florida. Such change was au obligations of, Section 607.0505, Flori	the above-named corp thorized by the corporal da Statutes.	poration submits this statement for the p tion's board of directors. I hereby accep	urpose of changing its registered of the appointment as registered
SIGNATURE	Stanistone, typical or protect name of register	and another it analyzable. (NOTE:	Registered Agent signature regul	red when reinstating)	DATE
12.		S AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	
1-11.6	DP	☐ DELETE	1.1 TITLE		Change Addition
NAME	CHAIT, JONATHAN 52 SUMMIT CIRCLE		1.2 NAME		
STREET ADDRESS CHY-St-Zip	MONTREAL QU		1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	MONTREAL QUEB	EN MZVIDZ
III¢F	NOTITION OF	DELETE	2.1 TITLE	Trureday egos	☐ Change ☐ Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
C-TY-ST ZIP		DELETE	2 4 C(TY-ST-ZIP		Change Addition
TITLE NAME		L-1 DELETE	3.1 TILLE 3.2 NAME		Em Grange Em Addition
STEEL ADDRESS			3.3 STREET ADDRESS		
C(Ty - ST - Z)P			3.4. CITY - ST - ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4 3 STREET ADDRESS		
C(TY - \$1 - Z.P		Driete	4.4 CITY-ST-ZIP		The same that the same to the
THLE		☐ DELETE	5.1 TITLE		Change Addition
NAME OF A PROPERTY			5.2 NAME		
STREET ADDRESS : CITY - SE- ZIP			5.3 STREET ADDRESS 5.4 CITY - ST - ZIP		
TILE		DELETE	6.1 TITLE		Change Addition
NAME	1		6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-S1 ZIP			6.4 CITY - ST - ZIP		
14. I do herel	by certify that the information su	pplied with this filing does not qualify	for the exemption stated	in Section 119.07(3)(i), Florida Statutes	s. I further certify that the
Information	m malcated on this annual repo dicer or director of the corporati	ion or the receiver or trustee empower	e and accurate and that red to execute this repo	t my signature shall have the same lega rt as required by Chapter 607, Florida S	remedias ir made under dain; that tatutes; and that my name

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ENT, HAR3/97

**FILED** 

Mar 28 1997 8:00am

Secretary of State