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

**PROFIT CORPORATION ANNUAL REPORT** 

1997

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 15 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 828651

(0)

STEEGO	O CORPORATION							
Principal Plac	e of Business	Mailing Address			4 100 (0) 1010 (10 5) 1036	n Ekkak ahigi ikal atali 81	DI ANDIN TÜÜLE MÜÜH	
5114 OKEECHOBEE BLVD 5114 OKEECHOBEE BLVD								
SUITE 112 W Palm BCH	FL 33417	SUITE 112 W PALM BCH FL 33417-45	75					
US	***************************************	US			3. Date incorporated of	or Qualified 3a.	Date of Last R	teport
					09/14/1972		4/23/1996	
2. Principal P	lace of Business	2s. Mailing Address	•		4. FEI Number	<u>L</u>	<del></del>	oplied For
21 26					13-1841807		No	ot Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Status	Desired		Additional
City & State	<u> </u>	City & State	v & Stalo					equired
23	e e	28			6. Election Campaign			May Be
Zip	Country	Zip	Country	,	Trust Fund Contribu  8. This corporation ha			to Fees
24	25	F1	30	•	Florida Statutes		Die tax under s	. 199,032,
	g. Name and Address of Curren				10, Name and Addres			
UNI	TED STATES CORPORATION CO	MPANY	81	Name				
120	1 HAYES ST		82	Street	Address (P.O. Box Number is N	lot Acceptable)		
STE 105					radioo (i io: box rainber is i	- Control of the cont		
TAL	LAHASSEE FL 32301		83					
			84	Cily			■ <b>85</b> Zip	Code
<del></del>				'				
office or ragent. I a	to the provisions of Sections 607.050; egistered agent, or both, in the State im familiar with, and accopt the obliga	2 and 607.1508, Florida Statute of Florida. Such change was a itions of, Section 607.0505, Flo	es, the abov authorized by orida Statute	e-named y the corp s.	corporation submits this staten poration's board of directors. It	nent for the purpose nereby accept the a	of changing it ppointment as	ts registered registered
SIGNATURE								
12.	Signature, typed or printed name of registered age OFFICERS ANI		13.	ent signature	required when reinstating) ADDITIONS/CHANG	DATE	· <del></del>	IC IN 12
TITLE	VST DELETE		1.1 THILE		V/S/T/D	ES TO OFFICENS A	X Change	Addition
NAME	CURTAS, W W		1.2 NAME		Curtas, William	LI		
STREET ADDRESS			1.3 STREET	I ADDRESS			112	}
CITY-ST-ZIP	WEST PALM BEACH FL		1.4 C(TY - S		5114 Okeechobee West Palm Beach	FL 33417	e 112	
TITLE	_		2.1 TITLE				☐ Change	Addition
NAME			2.2 NAME					
STREET ADDRESS			2.3 STREFT	ADDRESS				
CITY-ST-ZIP			2. 4 CI1Y -	\$1-ZIP				
TITLE	**		3.1 TITLE				Change	☐ Addition
NAME			3.2 NAME					
STREET ADDRESS	7825 FAY AVE., SUITE 380 LA JOLLA CA		3.3 STREET					
CITY-ST-ZIP TITLE	AS	DELETE	3.4. CITY-:	\$1 - 7IP		<del> </del>	Change	Addition
NAME	FISHER, LINDA A	otteric	4.1 TITLE 4. 2 NAME				Lan Change	☐ Addition
STREET ADDRESS	250 AUSTRALIAN AVENUE, SC	)UTH	4.2 NAME	AUUBEGG				
CITY-ST-ZIP	WEST PALM BEACH FL	· <del>- · · ·</del> ·	4.3 STREET					
TITLE			5.1 HILE				Change	Addition
NAME		- -	52 NAME	1			· · •	
STREET ADDRESS			5.3 STREET	ADDRESS				
CITY-ST-ZIP			5.4 CITY-S					
TITLE		DELETE	6.1 11TLE				Change	Addition
NAME			6.2 NAME					
STREET ADDRESS			6.3 STREET	ADDRESS				

6.4 CITY - ST - ZIP 14. I do hereby certify that the information supplied with this filing 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 eath; 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 3 if changed, or on an attachment with an address.