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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F01155

(3)

Mailing Address

CHARLES L. JAFFEE, P.A.

FILED
May 02 1997 8:00am
Secretary of State

1761 W HILLS SUITE #401 DEERFIELD BI	BORO BLVD. EACH FL 33442	1701 W HILLSBORO HILL #303 DEERFIELD BEACH FL 33 US			Date Incorporated or Qualified	3a. Date of Las	t Report		
					10/09/1980	04/24/199			
2. Principal Place of Business 2a. Mailing Address		2a. Mailing Address			4, FEI Number		Applied For		
21		26	26		59-2025395 Not Ap		Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.	} 1		5. Certificate of Status Desired		\$8.75 Additional Fee Required		
City & State City & State 23 28		├ ¬ '			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip 24	Country 7ip C 25 29 30			ry	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No				
	9. Name and Address of Curr	ent Registered Agent			10. Name and Address of New Reg	istered Agent			
	FEE, CHARLES L		8	1 Name					
170	1 W HILLSBORO BLVD #303		B	2 Street Add	Street Address (P.O. Box Number is Not Acceptable)				
	TE 401				riacioso (1.0. box mullipor la macrioachitable)				
DE	ERFIELD BEACH FL 33442		8	3					
			8	4 City		FL 85 Z	ip Code		
11. Pursuant	to the provisions of Sections 607.0	502 and 607.1508, Florida Statut	es, the abo	ve-named co	reporation submits this statement for the production in board of directors. I hereby assess	roose of changin	g its registered		
agent. I a	m familiar with, and accept the obl	igations of Section 607.0505, Fl	orida Statut	es.	ation's board of directors. I hereby accep	tine appointment	as registered		
SIGNATURE									
	Signature, typed or printed name of registered			gent signature req	juired when reinstating)	DATE			
12. TITLE	OFFICERS A	ND DIRECTORS DELETE	13. 11 THE	— т	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECT			
	_ · ·						le FT Yourday		
NAME JAFFEE, CHARLES L STREET ADDRESS 1761 W. HILLSBORO BLVD. STE 401		1.2 NAMI							
DEPORTED BEACH PLANAS			1	ET ADDRESS					
CITY-ST-ZIP TITLE	PPELITIES DEVOLUTE 004	DELETE	1,4 City 2,1 Title			Chang	e Addition		
NAME			2.2 NAM						
STREET ADDRESS				ET ADDRESS					
CITY-ST-ZIP	1		2. 4 CITY	ì					
	DULTE		3.17171.6			Chang	ge Addition		
NAME			3.2 NAM						
STREET ADDRESS			3.3 STRE	ET ADDRESS					
CITY-ST-ZIP			3.4. CITY	-ST-ZIP					
TITLE		DELETE	4.1 TITLE			Chang	ge Addition		
NAME			4. 2 NAM	E					
STREET ADDRESS			4.3 STRE	E1 ADDRESS					
CITY-ST-ZIP			4.4 CITY						
TITLE		DELETE	5.1 1111.6			Chang	ge [] Addition		
NAME			5.2 NAMI	E					
STREET ADDRESS	,		53BTRE	ET ADDRESS					
CITY-ST-ZIP		T Severa	5.4 CHY						
TITLE		☐ DELETE	61 TITLE			L Chang	ge L_ Addition		
NAME			6.2 NAM						
Street address			6.3 STRE	ET ADDRESS					
CITY-ST-ZIP	by and that the information area	P. Jan H. W. H.	6.4 CITY	-ST-ZIP					

1.4. 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 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 attaghment with an address.

OLONIATURE.

hard latter

Charles L. Juffe

4/1/5)