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**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F15545

REYNOLDS & REYNOLDS, CHARTERED

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Feb 18 1997 8:00am
Secretary of State

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	ace of Business	Mailing /	Address			i comison ason mona écont meier manor o			
555 SOUTH FEDERAL HIGHWAY P. SUITE 450 BCA RATON FL 33432 US			P. O. BOX 490 BOCA RATON FL 33429-0490 IIS						
		00				3. Date Incorporated or Qualified 01/21/1981		e of Last R 8/1996	eport
2. Principal	Place of Business	2a. Maili	ng Address		·	4. FEI Number	<u></u>		oplied For
1		26				59-2066696		No	ot Applicab
Suite, Ap	ot #, etc.	Suite 27	, Apt. #, etc.			5. Certificate of Status Desired			Additional equired
City & Sta	ate	City (	& State			6. Election Campaign Financing		\$5.00	May Be
]		28				Trust Fund Contribution			to Fees
Zip	Country	Zip		Country	1	8. This corporation has liability for			. 199.032,
	25	29		30			Yes [		
	9. Name and Address of Ci	urrent Registered	Agent			10. Name and Address of New R	egistered A	gent	
Ri	EYNOLDS, JOSEPH J.			81	Name				
55	55 South Federal Highwa Uite 450	Υ		82	Street Add	dress (P.O. Box Number is Not Accepte	ıble)		
	OCA RATON FL 33432			83			·-···		·····
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				64	City		FL	<b>85</b> Zip	Code
SIGNATURE	E Signature, typed or printed name of register	ed agent and title if applic	cable (NC	OTE Registered Ag	ent signature requ	uired when reinstating)	DATE		
2.	OFFICERS	AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFI			
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ame	REYNOLDS, JOSEPH J			1.2 NAME			,		
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information indidated in 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 attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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