## 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 # F48866

(0)

CLIFFORD B. SELWOOD JR., P.A.

**FILED** 

May 13 1997 8:00am

Secretary of State

Principal Place	Principal Place of Business Mailing Address					C 18 Briego 1/1/1 global 18/10/2 divino divino latin di Bill Briegi di Bill 18/1/1				
700 W TROPICAL WAY PLANTATION FL 33317 US		700 W TROPICAL WAY PLANTATION FL 33317-3350 US								
						3. Date Incorporated or Qualified 11/01/1981	3a. Dat	e of Last F 19/1996	Report	
<del></del> ·	ace of Business	26. Mailing Address	2a. Mailing Address			4. FEI Number		<b> </b> -	pplied For	
21		26			59-2149423	Not Applicable				
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 Additional Fee Required		
City & State	)	City & State				6. Election Campaign Financing			May Be	
23		28			Trust Fund Contribution	Added to Fees				
Zip	Country	Zip	Country			8. This corporation has liability for i	ntangible t		s. 199,032,	
24	25	29	30			Florida Statutes X Yes No				
	9. Name and Address of Current	Registered Agent	·· <del>-</del>	B1 Na	me	10. Name and Address of New Re	gistered A	gent		
	WOOD, CLIFFORD B., JR.		Ĺ	Na Na						
	W TROPICAL WAY NTATION FL 33317			<b>82</b> Str	eet Addr	ess (P.O. Box Number is Not Acceptab	le)			
				83						
			-	<b>84</b> Cit	y		r: i	<b>85</b> Zip	Code	
44 D	the annuicing of Protions COV Of CO	11-1 007 1600 Flatter Dist.	too the ab			the state of the s	FL	<u></u>	ito annial and	
office or re agent. I ar	o the provisions of Sections 607.0302 egistered agent, or both, in the State on familiar with, and accept the obligation	rand 607.1508, Florida Statu of Florida. Such change was lions of, Section 607.0505, Fl	ies, me ad authorized orida Stati	ove-nar by the itos.	corporat	poration submits this statement for the plants board of directors. I hereby acception's	t the appo	intment as	registered	
SIGNATURE	Signature, typed or printed nume of registered agon	t and title if applicable. (NO)	t: Rogistored	Agent sign	ature requir	ed whon reinstating)	DATE		~ · · · · · · · · · · · · · · · · · · ·	
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTOR	3S IN 12	
TITLE	PST CONTRACTOR OF The	DELETE	1.1 TIT	LÉ	-			Change	Addition	
NAME	SELWOOD, CLIFFORD B.,JR.		1.2 NA	ME.						
STREET ADDRESS	700 W TROPICAL WAY			REET ADDR	SS					
CITY-ST-ZIP	PLANTATION FL	DELETÉ		Y-ST-ZIP				Change	Addition	
TITLE NAME	SELWOOD, CLIFFORD B.,JR.	□ DETETE	21 111				•	Charige	L' HODIOOU	
STREET ADDRESS	700 W TROPICAL WAY		1	2 NAME 3 STREET ADDRESS						
CITY-ST-ZIP	PLANTATION FL		1	TY-ST-ZIP	ì					
TITLE	14.5	DELETE	3.1 7/1				<del>- \</del>	Change	Addition	
NAME			3.2 NA	MÉ						
STREET ADDRESS			3.3 ST	REET ADDR	ss					
CITY-ST-ZIP			3.4 CI	1Y-ST-7IP						
TITLE		☐ DELETE	4.1 1()	LΕ				Change	Addition	
NAME			4. 2 NA	<b>IN</b> E						
STREET ADDRESS			4.3 ST	REET ADDR	ESS					
CITY-ST-ZIP		Daries		Y-ST-ZIP				CT AGE	T Annu	
TITLE		☐ DELETE	5.110					Change	Addition	
NAME	·		5.2 NA							
STREET ADORESS			1	REET AODR	522					
CITY-ST-ZIP TITLE		DELETE	5.4 CR 6.1 TH	Y-ST-ZIP				Change	Addition	
		□ vc.c.t	6.2 NA				i	Grianiye	E VOUIDII	
NAME STREET ADDRESS				me Reet Addr	-66					
STREET ADDRESS   CITY-ST-ZIP					(00					
44 Ldo borok	by certify that the information supplied	with this filing does not oual	ily for the	Y-ST-7IP exempti	I on stated	Hir Section 119.07(3)(i), Florida Statute	s. I further	certify that	t the	
Informatio I am an of appears in	n indicated on this annual report or sufficer or director of the corporation or n Block 12 or Block 13 if changes, o	upplemental annual report is the receiver or trustee empoy lacks int with an ad-	true and a vered to e dress.	courate xecute	and Hat	my signature shall have the same lega rt as ocquired by Chapter 607, Florida S	l effect as tatutes; ar	if made un id that my	nder oath; that name	