## 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 # F65815

Mailing Address

CANTRELL, INC.

Principal Place of Business

(5)

**FILED** Feb 27 1997 8:00am Secretary of State



19103 SE JUPITER RIVER DR JUIPTER FL 33458 US		19103 SE JUPITER RIVER DR Juipter FL 33458-1023 US						
					<ol> <li>Date Incorporated or Qualified 02/03/1982</li> </ol>	3a. Date o 03/21/		eport
2. Principal	Place of Business	2a. Mailing Address		· <del>··········</del>	4. FEI Number	<del></del>	Ap	plied For
21		26			58-0160747		No	t Applicable
Suite, Apt. #, etc. 22		Suite, Apt. #, etc.	ļarang.		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
Orty & Sta 23	ate	City & State		·	Election Campaign Financing     Trust Fund Contribution		\$5.00 Added t	
Ζφ <b>24</b>	Country	Z(p <b>29</b>	Countr 30	/		⊈Yes 🔲 N	0	199.032,
	9. Name and Address of Co	urrent Registered Agent		·	10. Name and Address of New Re	pistered Age	<u>nt</u>	
	INTRELL, CHRIS		81	Name				
19103 S.E. JUPITER RIVER DR. JUPITER FL 33458					dress (P.O. Box Number is Not Acceptab	le)		
			83					
			84	City		FL 8	5 Zip (	Code
office of agent. I SIGNATURE	<u>.</u>				rporation submits this statement for the p ation's board of directors. I hereby accep		nent as	registered
	Signature, typical or printed name of register			ent signature requ	uired when reinstating)	DATE	FOTOS	0.01.40
12.		S AND DIRECTORS  DELETE	13. 1.1 TITLE		ADDITIONS/CHANGES TO OFFIC		Change	S IN 12 Addition
TITLE	PD Cantrell, Chris	L'1 percie				ليا	Спапре	Addition
NAME	ANALAS A C. ILIBERTO DI DE	1	1.2 NAME					
STREET ADDRESS	JUPITER FL	•	4	T ADDRESS				
CITY - ST - ZIP	S	DELETE	1.4 CITY- 2.1 TITLE	S1-ZIP		— П	Change	Addition
NAME	CANTRELL, DONNA	tand becare	2.2 NAME				2.na.ngo	
STREET ADDRESS	ANAMA A P. ILIBETTO DI DE	₹	4	T ADDRESS				
C:TY - ST - ZiP	JUPITER FL	•	2 4 CITY-					
TITLE		DELETE	3.1 TITLE	-			Change	Addition
NAME	(		3.2 NAME					
STREET ADDRESS	s		3.3 STREE	T ADDRESS				
CITY - ST - 7(P			3.4. CITY -	ST-ZIP				
THLE		DELETE	4.1 TITLE				Change	Addition
NAME			4. 2 NAM					
STREET ADDRESS	5		4.3 STREE	T ADDRESS				
CITY-ST-ZIP			44 CITY-	ST-ZIP				
TITLE		☐ DELETE	5 1 TITLE				Change	Addition
NAME			5.2 NAME					
STREET ADDRESS	S (		5.3 STAES	F ADDRESS				
CITY - STZIP			5.4 CITY-	ST-ZIP				
TITLE		DELETE	61 TITLE				Change	Addition
NAME			6.2 NAME					
STREET ADDRESS	s		6.3 STREE	T ADDRESS				
CITY - ST - 7/P			6.4 CITY -	Ϋ́				

14. I do hereby certify triat the information supplied with this filing does not quality 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 so an attachment with an address.

SIGNATURE: