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 # F9600001075 (8)

THE CARTOLITH GROUP, LTD., INC.

FILED Jan 31 1997 8:00am Secretary of State



Principal Place of Business 3210 S.W. 14TH PLACE BOYNTON BEACH FL 33426		Mailing Address 3210 S.W. 14TH PLACE BOYNTON BEACH FL 33426-9007		T TO 1518 & 1110 18019 BITHS CONTLOCKIN OUT BOTH BEST (1801) OR IN 1888 BITH 1884				
2. Principal P	race of Business	2a. Mailing Address			4. FEI Number		Ar	plied For
21 2		26	26		11-2288040 Not		ot Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	N	\$8.75	
22		27			J. Continuate of otation because		Fee Re	equired
City & State		City & State		6. Election Campaign Financing		\$5.00	May Be	
23		28		Trust Fund Contribution	Added to Fees			
Zip	Country	Zip	Coun	ry	8, This corporation has liability for			. 199.032,
24	25	29	30			Yes		
	g. Name and Address of Curre	ent Registered Agent		<u> </u>	10. Name and Address of New Re	gistered /	gent	
	STEFANO, LOUIS		8	1 Name				
3210 S.W. 14TH PLACE BOYNTON BEACH FL 33426					dress (P.O. Box Number is Not Acceptate	ole)		
			ŀ	3				
			Ī	4 City		FL	85 Zip	Code
agent. I a	om familiar with, and accept the obli-	igations of, Section 607.0505,	Florida Statu	es. 	ation's board of directors. I hereby accelured when renatating)	DATE	7.10.11.20	
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	CERS AND	DIRECTOR	RS IN 12
TITLE	PC	DELETE	1.1 TITL	T T	(10011010101010101010101010101010101010		☐ Change	Addition
NAME	DESTEFANO, LOUIS		1.2 NAM				•	
STREET ADDRESS	3210 S.W. 14TH PLACE			ET ADDRESS				
CITY-ST-ZIP	BOYNTON BEACH FL 33426	3		-ST-ZIP				
TITLE	S	DELETE	2.1 TITL			****	Change	Addition
NAME	SANTORA, JUDY		2.2 NAM	E .			-	
STREET ADDRESS	3210 S.W. 14TH PLACE			ET ADDRESS	•			
CITY-ST-ZIP	BOYNTON BEACH FL 33426	3		7-ST-ZIP				
TITLE		DELETE	3.1 TITL				Change	☐ Addition
NAME			3.2 NAN	1			- •	_
STREET ADDRESS				ET ADDRESS				
CITY - ST - ZIP				r-ST-ZIP				
TITLE		DELETE	4.1 TITL				Change	Addition
NAME			4. 2 NA)				=	
STREET ADDRESS	1		T *1 E (8/1)	- 1				
)		43,518	EET ADDRESS				
				EET ADDRESS				
Crty-St-ZiP		□ DELETE	4.4 CITY	-ST-ZIP			Change	Addition
CITY-ST-ZIP TITLE		DELETE	4,4 CITY 5,1 TITL	-ST-ZIP			Change	Addition
CITY-ST-ZIP TITLE NAME		☐ DELETE	4.4 CITY 5.1 TITL 5.2 NAM	E E			Change	☐ Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS		DELETE	4.4 CIT) 5.1 TITL 5.2 NAM 5.3 STR	-ST-ZIP E EET ADDRESS			Change	☐ Addition
City-St-ZiP Title NAME Street Address City-St-ZiP			4.4 CIT) 5.1 TITL 5.2 NAM 5.3 STR 5.4 CIT)	E E IE EET ADDRESS			•	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE		☐ DELETE	4.4 CITY 5.1 TITL 5.2 NAN 5.3 STR 5.4 CITY 6.1 TITL	E E E ADDRESS (-ST-ZIP E			☐ Change	
City-St-ZiP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME			4.4 CITY 5.1 TITL 5.2 NAM 5.3 STR 5.4 CITY 6.1 TITL 6.2 NAM	E E E E E E E E E E E E E E E E E E E			•	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE			4.4 CITY 5.1 TITL 5.2 NAM 5.3 STR 5.4 CITY 6.1 TITL 6.2 NAM 6.3 STR	E E E ADDRESS (-ST-ZIP E			•	

1. 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; the Lam an officer or director of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Plack 13 or Plack 13 if page 314.

SIGNATURE:

SONATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

1/20/97 56/-369-