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



COF ANNU	ILE NOW: FIL PROFIT RPORATION JAL REPORT 1997	ING FEE AFT	Sandra Secret	\$550.00  RIMENT OF STATE B. Mortham  ary of State  CORPORATIONS			,		
Principal Plac  Principal Plac  8921 NW 47H  DEERFIELD BG	ER INVESTMENT  e of Business  CT	MANAGEMENT	D3328 (9) COMPANY Mailing Address 3921 NW 4TH CT DEERFIELD BCH FL 334						
2. Principal P	lace of Business		a. Mailing Address			Date Incorporated or Qualified     06/28/1996     FEI Number	3a. Da	ate of Last F	·
2. Principal P	Jace of Business	26	n .			65-0649904		—	pplied For ot Applicable
Sulte, Apt.	Sulte, Apt. #, etc.		Suite, Apt. #, etc.		·	5. Certificate of Status Desired	<b>5</b> Ø	\$8.75	Additional
City & State	e	27	City & State			6. Election Campaign Financing			equired May Be
23		28				Trust Fund Contribution		Added	to Fees
Zip 24	Coun 25	1ry 29	Zip ]	Country 30		8. This corporation has liability for Florida Statutes		tax under s	s. 199.032,
		ress of Current Reg	Istered Agent			10. Name and Address of New Ro		Agent	
	CKLEY, THOMAS G			B1 Nan	ne				
	11 NW 4TH CT Erfiëld BCH FL 33	440		82 Stre	et Addre	ss (P.O. Box Number is Not Accepta	ble)		
UEC	TAPIELD DON IL 33	776		83			~		
				84 City	<del>,</del>			<b>85</b> Zip	Code
de Puraviant	to the provisions of So	otions 607 0503 and	607 1509 Elorido Stotu	too the charte term	ad sarna	ration automita this atatament for the	FL	.	to consisteron
office or n agent. I a SIGNATURE	m familiar with, and ac	cept the obligations	of, Section 607.0505, F	authorized by the clorida Statutes.  18: Registered Agent signa		<u></u>	DATE		
12.	DPT	OFFICERS AND DIRE	CTORS DELETE	13. 1.1 Tille		ADDITIONS/CHANGES TO OFFI	CERS AND	DIRECTOR  Change	RS IN 12
NAME STREET ADDRESS	BUCKLEY, THOM 3921 NW 4TH CT	<b>.</b>	_ Jeep 10	1.2 NAME 1.3 STREET ADDRES	ss				
CITY-ST-ZIP TITLE	DEERFIELD BCH D	1 L 33442	☐ DELETE	2.1 TITLE	<del> </del> -			☐ Change	Addition
NAME	BUCKLEY, DORIS			2.2 NAME					
STREET ADDRESS	3921 NW 4TH CT			2.3 STREFT ADDRES	SS				
CITY-ST-ZIP	DEERFIELD BCH DVS	FL 33492	☐ DELETE	2 4 CHY-ST-ZIP 3.1 HILE		· · · · · · · · · · · · · · · · · · ·		Change	Additio
NAME	SCRITO, STEVEN	P		3.2 NAME					- <u>-</u>
STREET ADDRESS	6574 VIA REGINA			3.3 STREET ADDRES	ss				
CITY-ST-ZIP	BOCA RATON FL	33443	DELETE	3.4. CITY-ST-ZIP		3		Change	Addition
TITLE NAME			LJ DELETE	4.1 TITLE 4. 2 NAME				— J Outrige	L AUGILION
STREET ADDRESS				4.3 STREET ADDRES	ss				
CITY-ST-ZIP			D. D. C.	4.4 CITY - ST - ZIP				——————————————————————————————————————	7 2
TITLE			☐ DELETE	5.1 TITLE				☐ Change	Addition
NAME STREET ADDRESS				5.2 NAME 5.3 STREET ADDRES	ss l				
CITY-ST-ZIP				5.4 CITY-ST-ZIP		√.			
TITLE			DELETE	6.1 TITLE	1		, <del> </del>	☐ Change	Addition
NAME				6.2 NAME					
STREET ADDRESS				6.3 STREET ADDRES	58				
CITY-ST-ZIP				6.4 CITY - ST - ZIP					

14. 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 sm 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 Block 12 or Block 13 if changed, or on an attachment with an address.

CIGNATURE, THIM XX LBUTKLEY TO 2018111 /111