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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G79320

(9)

FMC CAPITAL MARKETS, INC.

FILED	
May 13 1997 8:00ar	n
Secretary of State	

Principal Place	a of Business	Mailin	g Address		***************************************					
Principal Place of Business Mailing Address 800 5TH AVENUE, \$ SUITE 210 SUITE 210 NAPLES FL 33940 NAPLES FL 34102-6869										
US		US					3. Date Incorporated or Qualified			
2. Principal Pt	ace of Business	2a. M	ailing Address				4. FEI Number			oplied For
21	ALMA DALBERTANIA AND AND AND AND AND AND AND AND AND AN	26					59-2365501			ot Applicable
Suite, Apt a		27	ite, Apt. #, etc				5. Certificate of Status Desired	X		Additional equired
City & State	!	28 Ci	y & State				Election Campaign Financing Trust Fund Contribution			May Be to Fees
Zip	Country	Zij)	Соцг	itry		8. This corporation has liability for			. 199.032.
24 3410		29		30				Yes _		
0004	9. Name and Address of Curren	it Hegister	o Agent		31 Nam	Δ	10. Name and Address of New R	egistered A	gent	
	I, DONNA M 5TH AVENUE, SOUTH						Minimum			
	E 210			['	B2 Stree	et Addres	ss (P.O. Box Number is Not Accepta	ıble)		
	ES FL 33940			ļī	B3	·				
					B4 City			FL	85 Zip	Code
11. Pursuant I	the provisions of Sections 607.050	2 and 607.	1508, Florida Statu	tes, the ab	ove-name	d corpo	pration submits this statement for the	purpose of o	hanging i	ts registered
office or re agent. I ar	egistered agent, or both, in the State in familiar with, and accept the obliga	of Florida ations of, S	Such change was action 607.0505, Fi	authorized orida Statu	by the cites.	orporatio	on's board of directors. I hereby acce	ept the appoi	intment as	registered
SIGNATURE	Stgrature, typed or proted name of registered age	ent and title if ac	nicable. (NO	TE. Registered	Agent signal	ure regulred	d when reinstating)	DATE		
12.	OFFICERS AN			13.			ADDITIONS/CHANGES TO OFF		DIRECTOR	RS IN 12
THLE	DP		☐ DELETE	1.1 TITI	E		A CONTRACTOR OF THE CONTRACTOR		Change	RS IN 12
NAME	SCHROEDER, MICHAEL			1.2 NA	ME .					
STREET ADDRESS	600 5TH AVENUE, S., SUITE 2	10		1.3 \$TF	EET ADDRES			244	••	
CITY+S1+ZIP	NAPLES FL 33940 DV				Y-ST-ZIP	1 a	ples, FL	44 1	ロス	T Addition
TITEF	110							341		Addition
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NAME	WASMER, MARTIN M.	10	L} DELETE	2.2 NA	NE	,				
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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 within address.

SIGNATURE:

Date

Daytime Phone #