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 DIVIDIONI DE CODDODATIONO

CITY-ST-ZIP THELE NAME STREET ADDRESS

CITY-ST-7(P

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NAME STREET ADDRESS

TITLE

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	997	S. W. D.	DIVISION OF	CORPORA	IUNS		my O.	Diate	
DOCUM 1. Corporation N H & L REA		2180	(2)						
Principal Place of Business			Mailing Address			***************************************			
8353 W. ROGERS CIRCLE P.O. BOX 3760 P.O. BOX 3760									
BOCA RATON FL	33487-2709		RATON FL 33427						
U\$			US			3. Date Incorporated or Qualified 11/23/1983	3a. Date of 05/01/18		
2. Principal Plac	e of Business	26. 1	Mailing Address			4. FEI Number		Applied For	
1		26				59-2348923		Not Applicable	
Suite, Apt #,	etc	27	Suite, Apt. #, etc.			5. Certificate of Status Desired	1 '	3.75 Additional Fee Required	
City & Stale			City & State			Election Campaign Financing Trust Fund Contribution		5.00 May Be Added to Fees	
Zip	Country	├ ───	(ip	Count	ry	8. This corporation has liability for i	intangible tax u Yes 🏳 No		
4	25 9. Name and Addres	29 29 Section 29	red Agent	30		Florida Statutes 10. Name and Address of New Re			
··		 	ioo rigorii	8	1 Name	10, 144110 2110 2001000 01 11011 110	gistores Agen	<u>, </u>	
HAHAMOVITCH, HARRY H. 6353 W. ROGERS CIRCLE									
1				6	2 Street Ade	Street Address (P.O. Box Number is Not Acceptable)			
BOCA RATON FL 33487					63				
						The state of the s			
				6	4 City		FL 85	Zip Code	
11. Pursuant to l office or regi agent I am	the provisions of Section istered agent, or both, familiar with, and acce	ons 607,0502 and 607 in the State of Florida pt the obligations of,	1508, Florida Statu Such change was Section 607.0505, Fl	tes, the abo authorized forida Statut	ve-named co by the corpor es.	rporation submits this statement for the pation's board of directors. I hereby accept		ging its registered ent as registered	
SIGNATURE			· · · · · · · · · · · · · · · · · · ·	···	T				
12.	nature, typed or printed name of	of registered agent and blio if a FICERS AND DIRECT		TE Registered A	gent signature red	uired when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE	CTODE IN 12	
	PS OF	FIGERS AND DIRECT	DELETE	13. 1.1 TITU		N 10-7 C	TIZ A	hange Addition	
	IAHAMOVITCH, HAF	RRY H.		1.7 NAM		AHAMOVITCH, HARRY 353 W. ROGERS CIRCL	∨ نت مد	rango LJ nodition	
	353 W. ROGERS CI				ET ADDRESS 6	353 W. ROGERS CIRCL	E #]		
	OCA RATON FL	····		1.4 CITY	-ST-7IP	BOCA RATON, FL 3348	7		
TITLE V			DELETE	2.1 TITUE	:	1/	1 0	hange Addition	
NAME A	OBINSON, H.C. JAG	>B) 1 II		2.2 NAM	E #	ELETT, DAVID 353 W. ROGERS CIRCLE BOCA RATON, FL 334		- —	
STREET ADDRESS 1	70 N. COBY DRIVE	•			ET ADDRESS	353 W. LOGERS CIRCLE	`# <i> </i>		
CITY-ST-ZIP	DGEWATER FL			2.4 CITY	'-ST-ZIP	BOCA RATON, FL 334	87		
THTLE			☐ DELETE	3.1 TITLE			□ c	hange Addition	
NAME				3.2 NAM	E				

FILED

Apr 22 1997 8:00am

Secretary of State

CITY - ST - ZIP 6.4 CITY-ST-ZIP Ing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the multi annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that yet or vistee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name I do hereby certify that the information supplied with the information indicated on this annual report or supplied. Lam an officer or director of the corporation of appears in Block 12 or Block 13 if changed ent with an address

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

4.4 CITY-ST-ZIP

3.4. CITY-ST-ZIP

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

SIGNATURE:

DELETE

DELETE

DELETE

Change

Change

Change

Addition

Addition

Addition

SIGNING OFFICER OR DIRECTOR CH DEFIDENT