## 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** 

### Address ### A MCOONALD ### A MCO	1. Corporate	MENT # H06972 C ACCESSORIES, INC.	2 (4)							
NAPLES FL 33940   See   1403-5898   See   1403-5898   See   See   1403-5898   See	Principal Place of Business Mailing Address						T HOOIDIN BRIEF BEHFO DINING FAMIN HOBERD IN		1 <b>010</b> 13 <b>410</b> 36 (	
2, Principal Flate of Business   2a, Mulling Address   2a, Mulli	4637 TAMIAMI TR. N. NAPLES FL 33940		4099 TAMIAMI TRAIL NORTH, SUITE 307							
22										eport
Subo Apt # ctc   Subo Apt # ctc   Subo Apt # ctc   Set	2. Principal	Place of Business	2a. Mailing Address				<u> </u>		<del></del>	plied For
Suite   Suit	21	26					59-2414658		No	t Applicable
Copy & State	Suite, Apt. #, etc. Suite, Apt. #, etc.						5. Certificate of Status Desired			
28							Or Common or Claus Dogwood		<del></del>	
Country   Zip   Country   Zip   Country   Sip		ite	η '					r=1		
24 25 29 30 Fiorida Statutes   Yes   No  8. Name and Address of Current Registered Agent   10. Name and Address of New Registered Agent   10. Name and Address   10. Name and Name and Address   10. Name and	23	1 0	<b></b>							
MCDONALD, STANLEY A.   4099 TAMIAMI TRAIL NORTH SUITE 307 NAPLES FL. 39401   63		}¬ ′	→ ` · · · · · · · · · · · · · · · · · ·		ıtry					199.032,
MCDONALD, STANLEY A. 4099 TANIAMI TRAIL NORTH SUITE 307 NAPLES FL 39401  11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statules, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Torida. Such change was authorized by the corporation's board of directors. I hereby secept the appointment as registered spent, or both, in the State of Torida. Such change was authorized by the corporation's board of directors. I hereby secept the appointment as registered spent, or both, in the State of Torida. Such change was authorized by the corporation's board of directors. I hereby secept the appointment as registered spent and familiar value, and descept the obligations of Section 607.0505. Finded Statutes,	24			30		<del></del>				
### Addition #### Addition #### Addition #### Addition #### Addition #### Addition ####################################	NC		THOUSE TO A MOUNT		81 Na	ame	10. 1101110 0110 011011	tograco. du 71		
SUITE 307 NAPLES FL 39401  83  84  City  FL 85  City  City  FL 85  City  FL 85  City										
NAPLES FL 39401    63					<b>82</b> Str	reet Addre	ss (P.O. Box Number is Not Accept	able)		
B4   City   FL   65   Zip Code	* - · · - · · · · ·				83					
11. Pursuant to the provisions of Sections 607 0502 and 607, 1508, Florida Statules, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar value, and accept the obligations of, Section 607,0505, Florida Statules, and accept the obligations of, Section 607,0505, Florida Statules (MOTE Registered Apent agridure required when remarking)  12.	1979	1 665 1 6 6670 1		Ţ					· · · · · · · · · · · · · · · · · · ·	
11. Pursuant to the previsions of Sections 607 0502 and 607.1508, Florida Statules, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the Statu of Fords of Such change was authorized by the corporation's board of directors. I thereby accept the appointment as registered agent, and accept the obligations of Sections 607 0505, Florida Statules.  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  11. THE  12. NAME  STERN, F. MARIE  4637 TAMIAMI TRAIL NORTH  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. City St. 2#  NAME  4637 TAMIAMI TRAIL NORTH  15. SIREH ADDRESS  GRIV St. 2#  NAME  AS  CITY St. 2#  Change  Addition  Addition  Change  Addition  Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change  Addition  Change  Addition  Change  Addition  Addition  AS  CITY St. 2#  Change  Addition  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change  Addition  Change  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change  Addition  Change  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change  Addition  Change  Addition  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change  Change  Change  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change  Change  Change  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change  Change  Change  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change  Change  Change  Change  Change  Change  Change  Change  Change						ty		EI	85 Zip (	Code
STERN, F. MARIE   1.2 NAME   4837 TAMIAMI TRAIL NORTH   1.3 STREET ADDRESS   1.4 CITY-ST-ZIP	SIGNATURE	Signature type to pointed name of registered age OFFICERS AN	or and tille it applicable. (NOTE	Registered			d when reinstating)	DATE		
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City St Zip	NAME			1.2 NA	ME					
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STERN, ROBERT   3.2 NAME   3.3 STREET ADDRESS   CITY - ST - ZIP   TITLE   Change   Addition   Add	••••••••••••••••••••••••••••••••••••••	1				P	***************************************			
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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 from 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 of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

6.2 NAME

6.3 STREET ADDRESS

SIGNATURE:

 $\mathsf{NAM} \, \epsilon$ STREET ADDRESS

941.262.4545

**FILED** 

Apr 15 1997 8:00am

Secretary of State