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PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Feb 04 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H29623

(6)

Principal Place 5673 NW 39TH COCONUT CRE	AVENUE	Mailing Address 5673 N.W. 39TH AVENUE COCONUT CREEK FL 3307	3-4126		
					3. Date Incorporated or Qualified 11/13/1984 3a. Date of Last Report 03/14/1996
	lace of Business	2a. Mailing Address			4. FEI Number Applied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.			59-2465216 Not Applicable \$8.75 Additional
22		27			5. Certificate of Status Desired Fee Required
City & State	0	City & State			6. Election Campaign Financing \$5.00 May Be
23 Zip	Country	28 Zip	Country		Trust Fund Contribution Added to Fees 8. This corporation has liability for intengible tax under s. 199.032,
24	25		30		Florida Statutes Yes No
9. Name and Address of Current Registered Agent 10.					10. Name and Address of New Registered Agent
	AYO, LEONARD JR.		81	Name	
1151 NE 1ST AVE.			82	Street Add	fress (P.O. Box Number is Not Acceptable)
PON	IPANO BCH. FL 33082		63		
			84	City	FL 85 Zip Code
SIGNATURE	to the provisions of Sections 607.050 egistered agent, or both, in the State in familiar with, and accept the oblig Signaure, typed or penied meno of registured ago				poration submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered
12.	WIFE TAX TO THE TOTAL CO. C.	D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	☐ DELETE	1.1 TITLE		Change Addition
NAME	DE LAYO, LEONARD M.		12 NAME		
STREET ADDRESS	5673 N.W. 39TH AVENUE		13 STREET	- 1	
CHY-SI-ZIP	COCONUT CREEK FL ST	DELETE	1.4 CITY - 9 2 1 TITLE	ST-ZIP	Change Addition
NAME	DE LAYO, NANCY A.	ר"ל הערניונ	2.2 NAME		Change Addition
STREET ADDRESS	5673 N.W. 39TH AVENUE		2.3 STREET	ADDRESS.	
CITY - S1 - ZIP	COCONUT CREEK FL		2. 4 CITY-		
Tille	-M	DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME	1	
STREET ADDRESS			3.3 STREET	ADDRESS	
CITY-ST-ZIP		- I Double	3.4. CITY-	ST - ZIP	
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME CARETZ ABOULCE			4, 2 NAME	1	
STREET ADDRESS				ADDRESS	
C(TY-\$1-2)P TITLE		☐ DELETE	4.4 CITY - S	01-715	Change Addition
NAME		— ******	5.2 NAME		based a second and princip
STREET ADDRESS				ADDRESS	
CITY-ST-ZIF			54 CITY-5	1	· •
TITLE		DELETE	61 TITLE	1	Change Additio
NAME	!		6.2 NAME		
STREET ADDRESS			6.3 STREET	I ADDRESS	
CITY - S1 - ZIP			6.4 CITY-		
L informatio	in indicated on this annual report or :	supplemental annual report is tr	ue and acc	urate and tha	ed in Section 119.07(3)(i), Florida Statutes. I further certify that the at my signature shall have the same legal effect as if made under oath; the ort as required by Chapter 607, Florida Statutes; and that my name