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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

ANNUAL REPORT  1997  Secretary of Division of Corr					)NS	Secretary of State			
	MENT # H	<b>50347</b> L INC.	(4)						
Principal Place of Business Mailing Address  2500 E. HALLANDALE BEACH BLVD. P.O. BOX 811510 SUITE 4076 BOCA RATON FL 33481-1510 HALLANDALE FL 33009-3074									
						Date Incorporated or Qualified 04/03/1985	3a. Date of 02/13/	1996	
2. Principal P 550	Place of Business Biltmore Way	2a. 26	Mailing Address			4. FEI Number 59-2542826		Applied Not Ap	d For oplicable
Surte, Apt.		27	Suite, Apt. #, etc.		. <del></del>	5. Certificate of Status Desired	□ \$	8.75 Addit	tional
4	d Gables, FL	28	City & State			Election Campaign Financing     Trust Fund Contribution		5.00 May	/ Be
Zip 33134	Country US	у	Zip	Country 30		8. This corporation has liability for		inder s. 199	
		ess of Current Regist	ered Agent	61	Name	10. Name and Address of New Ro	egistered Ager	ıt	
LEVY, ANITA HORVATH 6605 NW 24 AVE.						700 D N		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
	CA RATON FL 33496	1		82	Street Add	ress (P.O. Box Number is Not Accepta	DIE)		
				83					
				84	City	<u> </u>	FL 85	Zip Code	6
		tiana 607 0609 and 60	7 1500 Florida Ctati	itee the above	namod cov	poration eubmite this statement for the	nurnose of cha	naina ite rec	nistored
	registered agent, or both am familiar with, and acc					poration submits this statement for the ation's board of directors. I hereby acceured when reinstating	purpose of cha ppt the appointm DATE	nging its reg nent as regi	gistered istered
SIGNATURE 2.	Stgnature, typed or pented name		Lapplicable (NC	OTE: Registered Ager			DATE CERS AND DIR	ECTORS IN	l 12
IGNATURE 2. ILE	Signature, typed or prefled name	e of registered agent and little o	Lapplicable (NC	DTE: Registered Ager 13.		uired when reinstating)	DATE CERS AND DIR	ECTORS IN	l 12
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SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/97

561,994-2526

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May 09 1997 8:00am

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