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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H66880

SAXON ENTERPRISES, INC.

(6)

FILED Apr 25 1997 8:00am Secretary of State



10323 SOUTH	ice of Business HERN BOULEVARD I BEACH FL 33411	Mailing Address 10323 SOUTHERN BOULEVARD ROYAL PALM BEACH FL 33411-4338					
					3. Date Incorporated or Qualified 07/17/1985	3a. Date of La 05/01/19	
2. Principal (Place of Business	2a. Mailing Address		·	4. FEI Number	1 00/0.7	Applied For
21 18679	SE Federal Highway	26 18679 SE I	ederal H	lighway	59-2575493		Not Applicable
Suite, Apt		Suite, Apt. #, etc). 		5. Certificate of Status Desired		75 Additional e Required
City & Sta		City & State 28 Tequesta	EL 33460	1	6. Election Campaign Financing		.00 May Be
Zip	sta,FL 33469	Zip Zip	Count		Trust Fund Contribution 8. This corporation has liability for		ded to Fees
24	25	29	30	·· ,		Yes DNo	161 6. 199.032,
	9. Name and Address of Curre				10. Name and Address of New Re	gistered Agent	
BALCH, PATRICIA 10323 SOUTHERN BLVD ROYAL PALM BEACH FL 33411			8	81 Name Rubenfeld, Daren, Esq. 82 Street Address (P.O. Box Number is Not Acceptable) 18679 SE Federal Highway			
			6	4 City		FL 85	Zip Code
11 Purcuso	et to the provisions of Sections 607.05	502 and 607 1509 Florida 9	Statutes the abo	Teque:	sta		33469
	11 9 1 1	te of Florida. Such change gations of, Section 607.050		by the corpora es. リアといわ	poration submits this statement for the pation's board of directors. I hereby accept	of the appointmen	nt as registered
SIGNATURE	Signature, typed of Intel Jame of registered a					/ · · · · · · · · · · · · · · · · · · ·	
L			(MOTE hagistered /	gent signature requ	ired when reinstating)	DAIL /	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
12.		NO DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC		
THILE	PD		13. E 1.3 TIYLE	P	ADDITIONS/CHANGES TO OFFIC	CERS AND DIREC	
TITLE NAME	PD MILLER, ROBERT L.	NO DIRECTORS	13. E 1.1 TIYLE 1.2 NAM	P. M.	ADDITIONS/CHANGES TO OFFICE S iller, Robert L.	☐ Cha	
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information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as it made under or Lam an efficer or director of the compitation 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 with an address.

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