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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H70507

(9)

CAPITAL REPORTING SERVICE, INC.

FILED
Feb 27 1997 8:00am
Secretary of State

Principal Place of Business 888 SOUTH ANDREWS AVE STE. 304 FT LAUDERDALE FL 33316		Mailing Address 888 SOUTH ANDREWS AVE STE. 304 FT LAUDERDALE FL 33316-1047				
				3. Date Incorporated or Qualified 08/08/1985	3a. Date of Last Re 03/11/1996	port
<u> </u>	Pace of Business	2a. Mailing Address	· · · · · · · · · · · · · · · · · · ·	4. FEI Number	App	olied For
21		26	·	59-2561899		Applicable
Suite, Apt		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Ac	
City & State		h		6. Election Campaign Financing	\$5.00 A	
23 Zip	Country	28 Zip	Country	Trust Fund Contribution	☐ i Added to	
24	25	i	30	8. This corporation has liability for in Florida Statutes	ntangible tax under s. Yes No	199.032,
[27]	9. Name and Address of Cur		301 	10. Name and Address of New Reg		
TO	DD, RENEE.		81 Name			
974	50-NW-120 WAY.	ALC: 1	82 Street Add	ress (P.O. Box Number is Not Acceptable	le)	
SU	NRISE-FL 33323	NEW ADDRESS -	> 83 //S	73 N. W. 49 0	RIVE.	
		•	84 City		1	
			84 City	AL SPRINGS	FL 85 Zip C	ode 076
 office or 	It to the provisions of Sections 607.7 registered agent, or both, in the St am familiar with, and accept the ob	ate of Florida. Such change was a u	athorized by the corpora	poration submits this statement for the pition's board of directors. I hereby accep	urpose of changing its It the appointment as re	registered egistered
	Signature, typical or pentied name of registeres		Registered Agent signature requ		DATE	
12.	OFFICERS DP	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE		
NAME	TODD, RENEE	☐ DELETE	1.1 TITLE		Change	Addition
1 ' ''	44678 4811 46 DDRF		1.2 NAME			
STHEET ADDRESS	CORAL SPRINGS FL		1.3 STREET ADDRESS			
CHY-ST-ZIP	SVT	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		Change	Addition
NAME	TODD, RENEE		2.2 NAME			mand
STREET ADDRESS	44070 4811 40 5500		2.3 STREET ADDRESS			
CitY+S1 7iP	CORAL SPRINGS FL		2.4 CITY-ST-ZIP	•		
101.0		☐ DELETE	3.1 TITLE		Change	☐ Addition
NAME			3.2 NAME			
STREET ACORESS	,		3.3 STREET ADDRESS			
City - S* - ZP			3.4. CHTY-ST-ZIP			
TITLE		DELETE	4.1 TITLE		Change	Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CHY-ST-7IP		DELETE	4.4 CITY-ST-ZIP		Charge	Addition
TOTLE NAME		TT NETELE	5.1 TITLE		☐ Change	Addition
			5.2 NAME			
STREET ADDRESS DITY-S1-ZIP			5.3 STREET ADDRESS 5.4 City-St-Zip			
T CHILDING	1		■ J.4 UR I * 3 (* 2)F			

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 true 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 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 12 the changed, or on an attachment with an address.

61 TITLE

6.2 NAME

6.3 STREET ADDRESS

64 CITY-ST-ZIP

SIGNATURE: 9

TITLE

NAME

STREET ADDRESS

CHY-S*-ZP

PED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

DELETE

2/17/97 954-502-640

Change

Addition