## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # **H79226** 

(7)

Principal Place of Business  C/O JOHN W. BAUER  1. Corporation Name  Multing Address  C/O JOHN W. BAUER  C/O JOHN W. BAUER								
109 SE 15TH TERR 109 SE 15TH TERR								
DEERFIELD BEACH FL 33441		DEERFIELD BEACH FL 33441			3. Date Incorporated or Qualified 3a. Date of Last Report 02/21/1995			
	ace of Business	2a. Mailing Address			4. FEI Number		Applied For	
Suite, Apt. #		Suite Apt. #, etc			59-2597196		Not Applicable \$8.75 Additional	
2		27			5. Certificate of Status Desired		Fee Required	
City & State		Oity & State			6. Election Campaign Financing		<b>\$5.00</b> May Be	
<b>3</b> [ <b>Z</b> ip	Country	Zip	Countr		Trust Fund Contribution		Added to Fees	
	25	29	30	y	8. This corporation has liability for Florida Statutes	or intangibie tax es □No	: under s 199.032,	
	9. Name and Address of Curr				10. Name and Address of New		gent	
			8.	1 Name				
BAUER,			8:	2 Street Add	dress (P.O. Box Number is Not Acceptable)			
	15th Terr LD Beach FL 33441		8:	3				
DECNIFIC	LD DEMON PL 33441							
			84	4 City		FL	85 Zip Code	
SIGNATURE .		ND DIRECTORS	Vice Fragishmod Au  13.	an'is griab ne requir	et con restator ADDITIONS/CHANGES TO OF	DATE FFICERS AND I	DIRECTORS IN 12	
TIFLE	PTD	DELETE	1 1 HHLE	:			Change Addition	
VAMÉ STREET ADORESS	Bauer, John W. 109 Se 15th Terr		1.2 NAME					
OTY - \$1 - ZIP	DEERFIELD BEACH FL		1.4 CITY -	T ADDRESS				
ITLE	VSD	DELETE	2 1 TITLE				Change Addition	
4Mč	BAUER, JANET M.		2.2 NAME				<u> </u>	
TREET ADDRESS	109 SE 15TH TERR		2.3 57468	1 ADDRESS				
HTF - ST - ZIP	DEERFIELD BEACH FL	[] DELETE	2.4 Cily				1 01	
AME			3 1 TITLE 3 2 NAME			L.	Change	
TREET ADDRESS				ET ADDRESS				
17 Y - S1 - Z1P			3 4 QIIY -	ST Z#F				
ı'ı <b>f</b>		☐ DELF1L	4 13/106				Change Addit on	
MME THE E ADGRESS			4.2 NAME					
THEFT ADDRESS TY-S1-ZP			4.3 S1RS8 4.4 CITY -	T ADDRESS				
:ILE		☐ DELETE	5 1 Tifus	.11 - ZJF			Change [ ] Addition	
AME			5.2 NAME					
TREET ADDRESS			53 STREE	! ADDRESS				
ITY ST-ZIP		F''s bolese	5.4 CHY 6.1 TITLE	ST-ZIP	··			
ITLE AMÉ		DELFTE					Change	
TREET ADDRESS			6.2 NAME	L VUMPECS				
CITY-ST-ZIP			6.4 CHY -	F ADDRESS SE-7/P				
certify that I oath; that I	vertify that the information supplied the information indicated on this an am an officer or director of the con Block 12 or Block 13 if changed	with this filing is voluntarily fur nual report or supplemental ac viation or the receiver or must on an attack ment with an ac-	mished and do	es not qualify	for the exemption stated in Section 11 ate and that my signature shall have th is report as required by Chapter 607.	9.07(3)(k), Florid de same legal e Florida Statutes	da Statutes. I further ffect as if made under s; and that my name	

SIGNATURE:

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/26/96 305-421-8343

CR2E034 (12/95