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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

ANNL	PORATION AL REPORT Secretary of St DIVISION OF CORPO			etary of Stat	e			Secretary of State				
 Corporatio 	MENT # J	01106 ORP.	(0)									
Principal Place	e of Business		Mailing Address					<u> </u>)}6 11 6 161 6161	SAN ISA	
3225 FOREST HILL BOULEVARD WEST PALM BEACH FL 33406 3225 FOREST HILL BOULEVARD WEST PALM BEACH FL 33406-5810												
								te Incorporated or Qualified /26/1986		te of Last R 29/1996	eport	
	lace of Business	<u> </u>	2a. Mailing Address					Number 59-2693879	<u></u>		plied For	
Suite, Apl.	#, etc.		Suite, Apt. #. etc.					rtificate of Status Desired		\$8.75 / Fee Re		
City & Stat	e		7 City & State					ction Campaign Financing	<u></u>	\$5.00	May Be	
Z ip	Coul	atry	2ip		untry	·	8. Thi	st Fund Contribution is corporation has liability for rida Statutes	intengible Yes			
24	25 9. Name and Add	2 Iress of Current Re	"	30	1	······································		rioa Statutes L				
TEA	ILOP, HELEN				81	Name						
5941 WOODWIND COURT						Street Add	dress (P.O. Box Number is Not Acceptable)					
LAK	E WORTH FL 3340	16			83						,	
					84	City			FL	85 Zip (Code	
11. Pursuant	to the provisions of S	ections 607.0502 an	d 607.1508, Florida St	atules, the s	bov	e-named cor	rporation su	Ibmits this statement for the d of directors. I hereby acce	purpose of	changing it	s registered	
agent fa	registered agent, or bi im familiar with, and a	ccept the obligation	s of, Section 607.0505	, Florida Sta	itute	s.	audits boar	d of directors. Thereby acce		VIIIII NORK AS 7	registered	
SIGNATURE	Signature Typed or printed in	Jerlof	I tile if applicable	NOTE Registers	ad Aou	nt signature requ	ilrad when rain	station)	7//8/9	<u> Z</u>		
12.	og man meso process	OFFICERS AND DI		13.		on agrando roqu		DITIONS/CHANGES TO OFFI	CERS AND	DIRECTOR	S IN 12	
TITLE	PST		DELETE	1.17	TLE					Change	Addition	
NAME	TERLOP, HELEN				IAME	}						
STREET ADORESS	5941 WOODWIN			1		ADDRESS						
CHTY-ST-ZPP TIPLE	V V	<u> </u>	DELETE	2.1.1		it-zip				Change	Addition	
NAMS	TERLOP, ANTHO	DNY J.	r prifit	5	IAME	•				- vininge		
STREET ADDRESS	5941 WOODWIN					ADDRESS						
CHY-ST-ZIP	LAKE WORTH FI					ST - ZIP						
TITLE			DELETE	3.1 1						Change	Addition	
NAME				321	IAME							
STREET ADDRESS				3.3 9	TREET	ADDRESS						
CITY - \$1 - 20P	···-		TT KELEYE			ST-ZIP				Change	gaubta-	
TITLE			☐ DELETE	4.11		\				Change	Addition	
NAME STREET ADDRESS					NAME TREET	ADDRESS						
CITY-\$1-ZIP				1		ST-ZIP						
TITLE			DELETE	5.17		4.11				Change	Addition	
NAME				5.21	IAME	1				-		
STREET ADORESS	{			5.3 9	TREET	ADDRESS						
CITY - ST- ZIP				540)TY-5	ST-ZIP						
TITLE			☐ DELETE		itLE					☐ Change	Addition	
NAME	}			621	AME							

6.4 CITY - ST - ZIP CITY - ST- ZIP 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 13 if changed, or on an attachment with an address.

6.3 STREET ADDRESS

STREET ADDRESS

FILED

May 08 1997 8:00am