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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J15979

(4)

U.S. INVESTMENT ADVISORS, INC.

FILED	
May 12 1997 8:00am	1
Secretary of State	

3111 CARDINAL DRIVE VERO BEACH FL 32963		mailing Address					
		3111 CARDINAL DRIVE VERO BEACH FL 32963-1920					
					3. Date Incorporated or Qualified 05/23/1986	3a. Date of Last 05/01/1996	
2. Principal P	lace of Business	2a. Mailing Addres	S		4. FEI Number		Applied For
		26			59-2676697		Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & Stat	0	City & State			6. Election Campaign Financing	\$5.0	May Be
		28			Trust Fund Contribution		d to Fees
Zip	Country	Zip	Co	untry	8. This corporation has liability for i		
	25	29	30		Florida Statutes	Yes 🔲 No	
	9. Name and Address of Curr	ent Registered Agent		T	10. Name and Address of New Re		
-9205 VERO	RIS, CHARLES E.	502 and 607.1508, Florida	Statutes, the a	83 84 City  above-named co	dress (P.O. Box Number is Not Acceptable or possible o	FL 85 Z	p Code g its registered as registered
IGNATURE	Styration, typical or product manual of registered	agent and title if applicable.	(NOTE: Register		guired when reinstating)  ADDITIONS/CHANGES TO OFFICE	DATE ERS AND DIRECT	100 IN 12
LF	PD	DELE		ITLE	ABOTTOTOTOTOTOTO	☐ Chang	
ME BEET ADDRESS LY- ST- ZIP	FAULMAN, MICHAEL R. 3111 CARDINAL DRIVE VERO BEACH FL		1.2 l 1.3 s 1.4 (	NAME Street adoress City-St-2ip			
NE ME BELS ADDRESS LY: ST- ZIP	TD FAULMAN, WILLIAM L. 3111 CARDINAL DRIVE VERO BEACH FL	DELE	2.21	NAME STREET AODRESS CITY-ST-ZIP		Chang	e
 [LE	S	DELE		TITLE		☐ Chang	e 🔲 Additi
AME REET ADDRESS	FAULMAN, PHYLLIS 3111 CARDINAL DR			NAME STREET ADDRESS			
TY- \$1-7 P	VERO BCH FL		34	CITY-ST-ZIP			
LF	VO	DELE		TITLE		Chang	e Additi
ME	FAULMAN, VIRGINIA		4 2	NAME		-	
REEL ADDRESS:	3111 CARDINAL DR			STREET ADORESS			
Y - ST - 7(P	VERO BCH FL		ſ	CITY-ST-ZIP			
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BEET ADDRESS.				STREET ADDRESS			
TY-87 70P		DELE		CITY-ST-ZIP		Chang	e Addit
TLF		LI Utilt		TITLE		L. Unang	e Magil
AME				NAME			
TEEL LADURESS			6.3 9	STREET ADDRESS			
II Y - ST - ZIF			6.4 (	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 Black 12 or Block 13 if changed, or on an attachment with an indicate the same legal effect as if made under oath; that

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTO

Res 4

19/97 Sol-507-477