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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # J29010

(2)

FILED Feb 18 1997 8:00am Secretary of State

Principal Place	D INTERIOR PLANT DESIGN,	Mailing Address WILLIAM GREENBERG			
% WILLIAM GREENBERG 8892 152ND PLACE. SOUTH 8892 152ND PLACE. SOUTH DELRAY BEACH FL 33446 DELRAY BEACH FL 33446-9787			787		Die allert Desart
				3. Date incorporated or Qualified 08/15/1986	3a. Date of Last Report 07/18/1996
	lace of Business	28. Mailing Address 26. G/J/WR	denn Way	4. FEI Number 59-2704494	Applied For
21 6/V Suite, Apt.		26 6/7/ W. Suite, Apt. #, etc.	SKIEN Way		Not Applicable \$8.75 Additional
22	,	27		5. Certificate of Status Desired	Fee Required
City & State	World Fr.	City, & State 28 Lake Win	•	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country 10 Palm Bear H	8. This corporation has liability to	_ ' _ '
24 33./6	9, Name and Address of Current		10 fa/m Bear H	Florida Statutes 10. Name and Address of New F	Yes No
				BEL LOLA T	
8892 152ND PLACE, SOUTH 82 Street Addres				ress (P.O. Box Number is Not Accept	able)
DEL	RAY BEACH FL 33446		83	BRITY WESTERN	
			83		1
•	_		84 City 1.0	V. unti	FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.0002	and 607.1508, Florida Statutes	s, the above-named corp	poration submits this statement for the	purpose of changing its registered
office or ri agent. I a	to the provisions of Sections 607,0002 egistered agent, or both, in the Sale of m familiar with, and accept the spligat	f Florida. Such change was au ions of, Section 607.0505, Flori	thorized by the corporation Statutes.	tion's board of directors. I hereby acc	ept the appointment as registered
SIGNATURE	THU TOUX				
12.	Symature, typed or plipted name of registered agent OFFICERS AND		Registered Agent signature requi	rad when reinstating) ADDITIONS/CHANGES TO OFF	DATE
TITLE	PD	DELETE	1.1 TITLE	ADDITIONO/OFIANGEO TO OTT	Change Addition
NAME	GREENBERG, WILLIAM		1.2 NAME		
STREET ADDRESS	8892 152ND PLACE, SOUTH		1.3 STREET ADDRESS		
CITY-ST-ZIP	DELRAY BEACH FL		1.4 CITY-ST-ZIP		
TITLE	SD LORE LOLAT	☐ DELETE		resident obcl. Lola	Change
NAME	LOBEL, LOLA T. 8892 152ND PLACE, SOUTH			ist western way	
STREET ADDRESS CTY-ST-ZIP	DELRAY BEACH FL			ake wuth F1 3	346 Z
TITLE	TO	DELETE	3.1 TITLE	EASURER	Change Addition
NAME	WITTER, JOAN		3.2 NAME	itter, Joan	75 -
STREET ADDRESS	8892 152ND PLACE, SOUTH		3.3 STREET ADDRESS (6.1)	st yestern m. d	
CITY-ST-ZIP	DELRAY BEACH FL		3.4. CITY-ST-ZIP	We worky FI 33	463 ·
TITLE		☐ DELETE	4.1 TITLE \$6	CRETARY	☐ Change ★Addition
NAME			4. 2 NAME	LABOU STEVEN	
STREET ADDRESS			4.3 STREET ADDRESS	LABOL STEVEN 154 Western Way	904. 2
CITY-ST-ZIP		T DELETE	4.4 C(TY-ST-ZIP	in wirth Fi	33463
TITLE		☐ DELETE	5.4 11162		Change Addition
NAME DERECT ADDRESS			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	5.4 CITY - ST - ZIP 6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST - ZIP		
	by certify that the information supplied	with this filing does not qualify		d in Section 119.07(3)(i), Florida Statu	ites. 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 pie receiver or rustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 15 if of anged, of on an attachment with an address.