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

PROFIT CORPORATION ANNUAL REPORT

1997

STREET ADORESS



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DANCC	JMENT # J43768 DL OF U.S., INC.	(7) Mailing Address							
3963-E COCO PLUM CIRCLE COCONUT CREEK FL 33063 US		3963-E COCO PLUM CIRCLE COCONUT CREEK FL 33063-5956 US							
						3. Date Incorporated or Qualified 11/19/1986		ate of Last R <b>05/1996</b>	eport
	Place of Business	2a. Mailing Address				4. FEI Number		<del></del>	oplied For
21 Suite, Ap	t M colo	Suite, Apt. #, etc.				59-2897374			ot Applicable
22		27				5. Certificate of Status Desired	<b>D</b>	•	Additional agulred
City & St	316	City & State			***************************************	6. Election Campaign Financing		\$5.00	May Be
<b>23</b> ] Zip	Country	28	I Cou	untry		Trust Fund Contribution		Added	·
24	25	29	30	2. M. g		This corporation has liability for Florida Statutes	intangible Yes		. 199.032,
<u>-1</u>	g. Name and Address of Current			Ι		10. Name and Address of New R			
SKAANING STEEN				81 1	lame			,	
3463-E COCO PLUM CIRCLE				82 S	treet Addr	ess (P.O. Box Number is Not Accepta	ble)		·
CC	OCONUT CREEK FL 33063						·		
				83					
				<b>84</b> C	ity		FL	85 Zip	Code
agent I SIGNATURE	It to the provisions of Sections 607.0502 registered agent, or both, in the State of an i farn har with, and accept the obligation of the state of the section of the sect	t and fit e if applicable (NC				ed when reinstating)  ADDITIONS/CHANGES TO OFFE	DATE		
HILE	DV	DELETE	1.1 T	ITLE				Change	Addition
NAME	SKAANING, STEEN		1.2 N	AME					
STREET ADDRESS			- 4	TREET ADD	- 1				
CHY ST-ZER THE	COCONUT CREEK FL	DELETE	1.4 C 2 1 Ti	17Y-ST-ZI	P			Change	Addition
NAME		C. pecete	21 II					-1 Auguste	L.J ROUNGI
STREET ADDRESS				TREET ADD	PRESS				
City-51 ZiF			1	CITY-SY-2	1				
INTLE		DELETE	3.1 T	ITLE				Change	Addition
NAMÉ			3.2 N						
STREET ADDRESS	5			TREET ADO					
City St. ZIP		DELETE		ITY-ST-Z	TIP			Change	Addition
TITLE		☐ DELETE	4.1 Ta					Change	ш жанаал
NAME STREET ADORESS			4.21	vame Treet adi	ADE GC				
OTY-S1-ZIP	,			ITY-ST-ZI	- 1				
THE		DELETE	5.1 1					[] Change	Addition
NAME:			5.2 N	AME					
STREET ADDRÉSS	5		5.3 \$	TREET ADO	PRESS				
City S* ZiP			5.4 C	ITY-ST-Z	IP				
TLLE		DELETE	6.1 T	ITLE				Change	Addition

6.2 NAME

6.3 STREET ADDRESS 6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filling 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 ruport 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 distent empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 it changed, or on an attackment with an address.

SIGNATURE:

Daytime Phone #

**FILED** 

Apr 24 1997 8:00am

Secretary of State

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