## 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 # J62508

(3)

FRANK PRINE & DANTE, INC.

SIGNATURE:

Mailing Address

5030 CHAMPION BLVD., SUITE G

Principal Place of Business

5030 CHAMPION BLVD., SUITE G

**FILED** Jan 21 1997 8:00am Secretary of State



FRANK PRINE

Daytime Phone #

BOCA RATON	FL 33496-2473	BOCA RATON FL 334	96-2473				
					3. Date Incorporated or Qualified 03/18/1987	3e. Date of Las 03/18/1990	
2. Principal Place of Business 2a. Mailing Address					4. FEI Number		Applied For
21 26					59-1757097		Not Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	1 7 7 7 7 7	5 Additional Required
City & Stat	CC	City & State			6. Election Campaign Financing	\$5.0	00 May Be
23		28			Trust Fund Contribution		ed to Fees
Zip	Country	Zip	Cou	intry	8. This corporation has liability for in		
24	25	29	30		Florida Statutes		DRMANT
	9, Name and Address of C	urrent Registered Agent		ad v	10, Name and Address of New iteg	istered Agent	NO ASSETS
	ne, frank			81 Name			İ
5030 CHAMPION BLVD., #G				62 Street Address (P.O. Box Number is Not Acceptable)			
B00	CA RATON FL 33431				•		
				83			
				84 City		85 Z	ip Code
				04, 04,			ip code
office or i	registered agent, or both, in the	17.0502 and 607.1508, Florida S State of Florida. Such change v obligations of, Section 607.0509	vas authorize	d by the corpora	poration submits this statement for the pi tion's board of directors. I hereby accep	urpose of changing t the appointment	g its registered as registered
SIGNATURE	Stgrint includes a printed name of regard	enud agest and title if applicable	(NOTE: Registere	d Agent signature requi	red when reinstating)	DATÉ	
12.		RS AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECT	TORS IN 12
TITLE	PD	DELETE	. 1.1 Ti	TLE		Chang	ge 🔲 Addition
NAME	PRINE, FRANK		1.2 N	AME			;
STREET ADDRESS	5030 CHAMPION BLVD,	<b>F</b> G	1.3 S	TREET ADDRESS			
CITY-ST-ZIP	BOCA RATON FL		1.4 C	TY-ST-ZIP			
TITLE		☐ DELETE	2.1 T	TLE		☐ Chang	ge 🔲 Addition (
NAME			2.2 N	AME			1
STREET ADDRESS			2.3 S	TREET ADDRESS			
CITY-ST-ZIP			2.40	ITY-ST-ZIP		1.5	
TITLE	DELETE		3.1 To	TLE		Chang	ge Addition
NAME			3.2 N	AME .			
STREET ADDRESS			3.3 \$	TREET ADDRESS			
CITY - ST-ZIP			3.4. 0	HTY-ST-ZIP			
TITLE		☐ DELETE	4.1 ] [	TLE		Chang	ge Addition
NAME			4. 2 N	IAME			
STREET ADDRESS			4.3 S	TREET ADDRESS		_	
CITY - ST- ZIP			4.4 C	ITY-ST-ZIP		•	
TITLE		DELETE	5.1 1	TLE		Chang	ge Addition
NAME			52 N	AME			
STREET ADORESS			535	TREET AODRESS			
CHTY-ST-ZIF			54C	ITY-ST-ZIP			į
TITLE		☐ DELETE				Chang	ge Addition
NAME			6.2 N	AME			
STREET ADDRESS				TREET ADDRESS			
CITY-ST-ZIP				ITY-ST-ZIP		*	
<b>14.</b> I do hero			qualify for the	exemption state	d in Section 119.07(3)(i), Florida Statutes		
Lam an c	officer or director of the corpora	orf or supplemental annual reportion or the receiver or trustee en ged, or on an attachment with an	powered to	accurate and tha execute this repo	t my signature shall have the same legal rt as required by Chapter 607, Florida S	tatutes; and that m	under oath; that ny name