## 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 # J65729

(2)

SOUTHER

Mailing Address

APPROVED
AND
FILED

97 MAY -2 PM 1: 15

SECRETARY OF STATE TALLAHASSEE, FLORIDA



Principal Plac	e of Business	Mailing Address				T LOGISSA OSIO OSIOL OSISS SOCIO LICER SENI ESOCIO OCOSE DIOSE OLONE OLONE OLONE			
300 WEST 10TH STREET PO BOX 9818 RIVERA BEACH FL 33419		300 WEST 10TH STREET PO BOX 9818 RIVERA BEACH FL 33419-4818							
THE PLANT						3. Date Incorporated or Qualified 04/03/1987	3a. Date of Las 05/01/199		
	Place of Business	2a. Mailing Address				4. FEI Number	L-	Applied For	
21		26				65-0005942		Not Applicable	
Sulte, Apt.		Suite, Apt #, etc.				5. Certificate of Status Desired		5 Additional Required	
City & Stat	t <b>e</b>	City & State				6. Election Campaign Financing		<b>00</b> May Be	
<b>23</b> Zip	Country	28 Zip	T C0	untry		Trust Fund Contribution		ed to Fees	
24	25	29	30	untry		8. This corporation has liability for i	ntangible tax unde Yes <b>X</b> No	er s. 199.032,	
E	9. Name and Address of Curren		[30]	Ţ		10. Name and Address of New Re	<b>/</b>		
EAL	KINS, SANDI F.			81	Name				
	) W. 10TH ST.			_					
	). BOX 9818			82	Street	Address (P.O. Box Number is Not Acceptab	10)		
	IERA BEACH FL 33419			83	·				
THE	ILIM DESCRIPTION						· · · · · · · · · · · · · · · · · · ·		
-	*			84	City		FL  85   2	ip Code	
11. Pursuant office or r	to the provisions of Sections 607.050 registered agent, or both, in the State	12 and 607.1508, Florida Statu of Florida, Such change was alions of Section 607.0505, F	tes, the a authorize	above ed by	e-named the corp	corporation submits this statement for the p poralion's board of directors. I hereby accep	urpose of changir t the appointment	ig its registered as registered	
SIGNATURE	Signature, typed or printed name of registered agree					required when relistating)	DATE		
12.	OFFICERS AN		13.		71 1 9 3	ADDITIONS/CHANGES TO OFFIC		ORS IN 12	
TITLE	DST	☐ DELEIE	1.1 T	ITLE		VPDST	Chan	ge Addition	
NAME	FRICK, CINDI M.		1.21	IAME		FRICK CINDI M. STREET	-T	•	
STREET ADDRESS 300 WEST 10TH STREET			1.3 STREET ADDRESS		ADDRESS	300 MEST 10 LH ZING	د ا ماران		
CITY-ST-ZIP	RIVIERA BEACH FL		1.4 (	DITY-S	1 - 2IP	RIVIERA BEACH, FL.	33419		
TITLE	DP	DELETE	211	IILE			Chan	ge 🔲 Addilion	
NAME	FAKINS, SANDI F.		2.2 N	IAME					
STREET ADDRESS 300 WEST 10TH STREET			2.3 STREET ADDRESS		ADDRESS				
CITY-ST-ZIP	DESCRIPTION OF THE PROPERTY OF		2.4	2. 4 CITY - ST - ZIP				ļ	
TITLE	DV ☑ DELETE 3.11		ITLE			☐ Chan-	ge 🔲 Addition		
NAME	FRICK, JAMES E.		3.2 N	IAME					
STREET ADDRESS	8295 N. MILITARY TRAIL		3.3 S	TREET	ADDRESS				
CITY-ST-ZIP	PALM BCH GARDENS FL		3.4	CH1Y - 5	T-ZIP				
TITLE	D	DELETE	411	ITLE			☐ Chan	ge 🔲 Addition	
NAME	FRICK, SHIRLEY M.		4 2 1	NAME				Į	
STREET ADDRESS	7000 N. MILITARY TRAIL		438	TREET	ADDRESS				
CITY-ST-ZIP	PALM BCH GARDENS FL		4.4 0	HY-S	T-ZIP				
TITLE	DV	M DELETE		5 1 TITLE			L Chan	ge Addition	
NAME	SMOLAK, MICHAEL J.		5.2 N	AME					
STREET ADDRESS	300 WEST 10TH STREET		5.3 \$	TREET	ADDRESS			Į	
CITY-ST-Z#P	RIMERA BEACH FL			ITY-S	T-ZIP				
TITLE	V	DELETE	6.1 T				☐ Chan	ge Addition	
NAME	EAKINS, DOUGLAS S.		1	IAME.				ļ	
STREET ADDRESS	300 WEST 10TH STREET		635	TREET	ADDRESS				
CITY-ST-ZIP	RIVIERA BEACH FL		6.4 0	ITY-S	T - ZIP		· · · · · · · · · · · · · · · · · · ·		

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 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 open attachment with an address.