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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J8358

(0)

Mailing Address

F. EDWARD HUGHES, P.A.

FILED
May 01 1997 8:00am
Secretary of State

800 GREENSWARD. #206 DELRAY BEACH FL 33445			800 Greensward. #206 Delray Beach Fl 33445-9037				
					3. Date Incorporated or Qualified 07/17/1987	3a, Date of Last Report 04/05/1996	
	lace of Business	2s. Mailing Address	2a. Mailing Address		4. FEI Number	Applied Fo	or IC
21		26	26		59-2816603	Not Applic	able
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suile, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	al
City & State	9	City & State			6. Election Campaign Financing	\$5.00 May Be	
23 Country		28			Trust Fund Contribution	Added to Fees	
Zip	Country	Zip	Count	ry	8. This corporation has tiability for in		2,
24	25	[29]	30		Florida Statutes X Yes No 10. Name and Address of New Registered Agent		
	T±.	Current Registered Agent		1 Name	10. Name and Address of New Reg	Jistered Agent	
HUGHES, F. EDWARD 800 GREENSWARD, #206							
	RAY BEACH FL 33445				dress (P.O. Box Number is Not Acceptab	Θ)	
į			8				
<u> </u>				4 City		FL 85 Zip Code	
11. Pursuant	to the provisions of Sections 6	607.0502 and 607.1508, Florida State	utes, the abo	ve-named co	proporation submits this statement for the p	urpose of changing its register	pare
agent. I a	m familiar with, and accept th	ne obligations of, Section 607.0505, f	Florida Statut	es.	ration's board of directors. I hereby accep	t the appointment as register	ea
SIGNATURE							
	Signature, typed or printed name of reg-			gent signature req	puired when reinstaling)	DATE	
12.		ERS AND DIRECTORS	18.	· · · · · · · · · · · · · · · · · · ·	ADDITIONS/CHANGES TO OFFIC		
TITLE	D	☐ DELETE	1.1 1018			Change () Add	dition
NAME	HUGHES, F. EDWARD			£			
STREET ADDRESS	800 GREENSWARD, #2	206	1.3 STRE	ET ADDRESS			
CITY-ST-ZIP	DELRAY BEACH FL		1.4 City				
TITLE	D	☐ DELFTE	2.1 TOLE			☐ Change ☐ Ado	dition
NAME	HUGHES, CHARLOTTE		2.2 NAME				
STREET ADDRESS	800 GREENSWARD, #2	206	2.8 S1RI				
CITY-ST-ZIP	DELRAY BEACH FL	December 1	2.4 C(1Y-S1-Z)P				
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NAME			3.2 NAM				
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NAME	☐ brreit		4 1 1/31/	j		E CHANGE E AU	untivii
			4 2 NAM	i			
STREET ADDRESS				ET ADDRESS			į
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NAME	↑ DETERE		5.2 NAM			C Ollende C Mar	DICTOR!
STREET ADDRESS							1
			1	ET ADDRESS			
ÇITY-ST-ZIP TITLE	45.4	DELETE	5.4 CITY 61 TITLE			Change Add	dition
NAME		b.a.t.	6.2 NAM			ET Allande ET Will	unioli!
				i			
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP			64 CITY	-SI-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 Block 12 or Block 13 if changed, or on an attachment with an address.

NONATURE VIET OF ONE