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

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 19 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J85796

(7)

PARKLAND ACQUISITION CORP.

Principal Place	e of Business	Mailing Ado	Mailing Address				a radicing and ribing picti (4316 parts and arbit and and arbit arbit and				
7750 N. FEDER BOCA RATON		7750 N. FEDERAL HWY. BOCA RATON FL 33487-1614									
							3. Date Incorporated 07/30/1987	or Qualified		ite of Last F 13/1996	Report
2. Principal P	lace of Business	2a. Mailing /	2a. Mailing Address				4. FEI Number			A	oplied For
21		26	26				<b>59-2840675</b> Not			ot Applicable	
Suite, Apt	#, etc	Suite, Ap	Suite, Apt. #, etc.				5. Certificate of Statu	a Danirad		\$8.75	Additional
22		27					p. Certinoate of State	a Desired	لسبا	Fee A	equired
City & State	t)	City & Si	City & State				6. Election Campaig	n Financing		\$5.00	May Be
23		28					Trust Fund Contrib	oution		Added	to Fees
- Zφ	Country	Zip	}¬ '				8. This corporation has fiability for intangible			_	. 199.032,
24	. [25]	[29]		30		<u></u>	Florida Statutes			_l No	
	9. Name and Address of C	urrent Hegisterea Ago	ent	81	1 :	Name	10. Name and Addre	ss of New Re	gistered /	Agent	<del> </del>
	MEL, BRADLEY A					Name					
	NW 96TH DR.					Street Address	Address (P.O. Box Number is Not Acceptable)				
PAR	KLAND FL 33076			00	╄						
				83	i						
				84	1	City			FL	85 Zip	Code
SIGNATURE	to the provisions of Sections 60 egistered agent, or both, in the manifest with, and accept the state of the specific specific provider protections of register.					named corporation signature required w		ment for the p hereby accep		changing i	ls registered registered
12.		S AND DIRECTORS		13.			ADDITIONS/CHAN	GES TO OFFIC		DIRECTO	RS IN 12
1 TLE	PS		DELETE	1.1 TITLE						Change	Addition
NAMÉ	HIMMEL, BRADLEY A			1.2 NAME							
STREET ADDRESS	5930 NW 96TH DR.			1.3 STREET	T AD	)DAESS					
CITY-ST-ZIP	PARKLAND FL 33076			1.4 CITY - 5	ST-7	ZIP					
T:TLE			DELETE	2.1 TITLE						Change	Addition
NAME				22 NAME							
STREET ADDRESS				2.3 STREET	T AD	DAESS					
City - St - 20P				2 4 CITY-	ST-	ZiP					
TITLE			DELETE	3.1 TITLE						Change	Addition
NAME				3.2 NAME							
STREET ADDRESS				3.3 STREET	GA 1	DRESS					
CITY - ST - ZIP				3.4 CITY-	st-	ZIP					
Title			DELETE	4.1 TOTLE						Change	Addition
NAME				4. 2 NAME							
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CITY-ST-ZIF				4.4 CITY - S	ST - 2	ZIP					
TITLE		Ι.	DELETE	5.1 TITLE						Change	Addition
NAME				5.2 NAME							
STREET ADDRESS				5.3 STREET	(AD	DRESS					
CITY-ST-ZIP				5.4 CITY - 5	ST - 2	ZiP					
TITLE			DELETE	6.1 TITLE						☐ Change	Addition
NAME				6.2 NAME							
STREET ADDRESS				6.3 STREET	ΙAD	ORESS					
OTV ST 7/P				GACITY. S	T. 7	710					

14. Ido 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