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 # J95722

(1)

CHAPIN, ARMSTRONG & BALLERANO, A PROFESSIONAL AS SOCIATION

SOCIATION					
Principal Place of Business Mailing Address		Mailing Address		- I SEDELING OLINE SENDI DININ INDUID HARAN HARA	JEBE DEDIT BIDIT BIDIT BIBIT BERIT IDEL
1201 GEORGE DELRAY BEAC US	BUSH BLVD. H FL 33483-7203	1201 GEORGE BUSH BLVI DELRAY BEACH FL 33483- US			
				 Date Incorporated or Qualified 10/01/1987 	3a. Date of Last Report 03/28/1996
2. Principal Place of Business 2a.		2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt	# ata	26 Cuito Ant # ato		65-0006074	Not Applicable
Suite, Apt	#, CIC.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	6	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Ζφ	Country	Zip	Country	8. This corporation has liability for in	
24	25	29	30	1	Yes No
	9. Name and Address of Curre	nt Registered Agent	81 Name	10. Name and Address of New Re	Jistered Agent
	APIN, ROBERT D		of Name		
	1 GEORGE BUSH BLVD		82 Street Add	iress (P.O. Box Number is Not Acceptab	le)
DEL	RAY BEACH FL 33483		83		
			84 City		FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statuti	es, the above-named cor	poration submits this statement for the p	urnose of changing its registered
office or r agent. La	registered agent, or both, in the Stati imi familiar with, and accept the oblic	e of Florida. Such change was a rations of, Section 607,0505, Flo	authorized by the corpora orida Statutes.	ation's board of directors. I hereby accep	t the appointment as registered
SIGNATURE	and the second second	,			
SIGNATURE.	Signature, type dioriponted name of repasco id as	ger and title diapplication (NOTI	Li Flegistered Agent signature requ		DATE
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	
TITLE	PTD	L DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	CHAPIN, ROBERT D.		1.2 NAME		
STREET ADDRESS	800 ANDREWS AVE.		1.3 STREET ADDRESS		
CITY-ST-ZIP	DELRAY BEACH FL	- Contract	1.4 City-St-ZIP		
TITLE	VP	☐ DELETE	2 1 TITLE		Change Addition
NAME	ARMSTRONG, DAVID G.		2.2 NAME		
STREET ADDRESS	4644 KITTIWAKE COURT		2 3 STREET ADDRESS		
CITY - ST - ZIP	BOYNTON BEACH FL	DELETE	2 4 CITY-ST-ZIP 31 TITLE		Change Addition
TITLE	S DALLEDANIO JAMES A ID	□ officit	32 NAME		Change C Abouton
NAME	BALLERANO, JAMES A JR 21083 SWEETWATER LANE I	INDTH			
STREET ADDRESS	BOCA RATON FL 33428	10RIII	3.3 STREET ADDRESS		
CITY-ST-7IP TITLE	BOCA RATOR FE 33420	DELETE	3.4. CITY - ST - ZIP 4.1 TITLE		Change Addition
NAME			4 2 NAME		
STREET ADDRESS			4 3 STHEET ADDRESS		
City - St - ZIP			4 4 CITY - ST - ZIP		
TITLE		DELETE	51 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS		i	5.3 STREET ADDRESS		
CITY - ST - ZIP			5.4 CITY - ST - ZIP		
THILE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST - ZIP		
14. I do here	by certify that the information supplied	ed with this filing does not quali	fy for the exemption state	ed in Section 119.07(3)(i). Florida Statute at my signature shall have the same lega	s. I further certify that the
I am an c	officer or director of the corporation of	receiver or trustee empow	vered to execute this repo	ort as required by Chapter 607, Florida S	tatutes; and that my name
appears	IN DIOCK 12 OF BIOCK 13 If CHANGED	or an attachment with an add	ness.		

SIGNATURE:

1/3/97

ytime Phone #

FILED

Jan 14 1997 8:00am

Secretary of State

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