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 # K02144

(9)

IBIZA PHASE II, INC.	

Principal Place of Business Mailing Address

FILED Mar 04 1997 8:00am Secretary of State



245 SE 10TH AVE. POMPANO BEACH FL 33080		245 SE 10TH AVE. POMPANO BEACH FL 33060	245 SE 10TH AVE. POMPANO BEACH FL 33080-7387					
					Date Incorporated or Qualified 11/16/1987	3a. Date of Last 02/08/1996		
	ace of Business	2a. Mailing Address			4. FEI Number		Applied For	
21	· · · · · · · · · · · · · · · · · · ·	26			65-0024309		Not Applicable	
Suite, Apl 22		5, Certificate of Status Desired LJ F.		1 1	Additional Required			
City & State City 23 28		28	City & State		Election Campaign Financing Trust Fund Contribution		May Be d to Fees	
Ζ(p)	Country 25	29	7 p Country 30			 This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes ☐ No 		
	9. Name and Address of Cu	rrent Registered Agent			10. Name and Address of New Reg	lstered Agent		
	RY, ROGER		81	Name			ļ	
245 SE 10TH AVE. POMPANO BEACH FL 33060				82 Street Address (P.O. Box Number is Not Acceptable)				
	83							
			84	l		FL	p Code	
11. Pursuant	to the provisions of Sections 607.	0502 and 607,1508, Florida Statute	s, the abov	e-named cor	rporation submits this statement for the pration's board of directors. I hereby accep	urpose of changing	j its registered	
agent La	m familiar with land accept the o	bligations of Section 607.0505, Flor	ida Statute	is.	allon's board or alloctors. Thereby accep	t no appointment	aa regiolered	
SIGNATURE								
	Signature Type a or profied name of registers	d agent and the diapplicable (NOTE: AND DIRECTORS		ent signature requ	uired when reinstaling) ADDITIONS/CHANGES TO OFFIC	DATE	ODC IN 12	
12.	DPVT	DELETE	13. 1.1 TITLE	 -	ADDITIONS/CHANGES TO OFFIC	Chang		
NAME	STARY, ROGER R.	trainer	1.2 NAME					
STHEFT ADDRESS	245 S.E. 10TH AVE.			T ADDRESS				
City-Sr-ZiP	POMPANO BCH. FL		1.4 CITY-					
THTLE		DELETE	2.1 TITLE	· · · · · · · · · · · · · · · · · · ·		Chang	e Addition	
NAME			2.2 NAME					
STREET ADDRESS			2.3 STREE	T ADDRESS				
C)1Y - S1 - ZIP			2. 4 CITY-	ST-ZIP				
TITLE		DELETE	3.1 TITLE			☐ Chang	e Addition	
NAME			3.2 NAME					
SYREET ADDRESS			3.3 STREE	T ADDRESS				
CITY ST-ZiF			3.4 CITY-	S1-2IP				
TifeF		☐ DELFTE	4.1 TITLE			☐ Chang	e 🔲 Addition	
NAME			4. 2 NAME					
SUREET ADDRESS			4.3 STREE	T ADDRESS				
CITY-St-769			44 CITY	ST-ZIP				
TITLE		DELETE	5 1 TITLE	İ		L Chang	e Addition	
NAME			52 NAME					
STREET ADDRESS			1	T ADDRESS			Į.	
CITY - ST - ZIP			54 CITY-	ST-ZIP				
TITLE		☐ DELETE	6.1 TITLE	}		L Chang	e 🔲 Addition	
NAME			6.2 NAME					
STREET ADORESS			6.3 STREE	T ADDRESS				
CITY-ST ZIP			6.4 CITY -		ed in Section 119 07/3Vi). Florida Statutas			

and recently entire mormation supplied with this filing does not quality for the exemption stated in Section 119 07(3)(f), Florida Statutes. Flurther 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 estachment with an address.

SIGNATURE:

OWATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DUECT

2/06/97

954-943-7466