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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K10329

(6)

MICHAEL A. VALENTICH, P.A.

FILED
Apr 15 1997 8:00am
Secretary of State

-	. FILLE 11613 10(1 310) 010)	RINN FAME OUR COUNTY OF

C/O MICHAEI 766 HUDSON	ace of Business L. A. Valentich I Avenue, Suffe A	Mailing Address C/O MICHAEL A. VAL 766 HUDSON AVENUE	E. SUITE A						
SARASOTA F	il 34236	SARASOTA FL 34236-	4 (39			3. Date Incorporated or Qualified 01/04/1988		of Last F 7/1996	Report
2. Principal	Place of Business	2a. Mailing Address				4. FEI Number 65-0020987	+		pplied For lot Applicable
Suite. A	nt. # etc	Suite, Apt. #, etc	;.			5. Certificate of Status Desired		\$8.75	Additional
22 City & St	talo	City & State		-	· · · · · · · · · · · · · · · · · · ·	# Steelin Consider Financias			May Be
23		28				Election Campaign Financing Trust Fund Contribution			l to Fees
Zφ	Country	Zip	Cour	ntry		8. This corporation has liability for in			s. 199.032,
24	25	29	30				Yes _		
	9, Name and Address of Cu	rrent Hegistered Agent		B1	Name	10. Name and Address of New Reg	istereo A	Seur	
	LENTICH, MICHAEL A. 6 HUDSON AVENUE		1						
	O HUDSON AVENUE			82	Street Addre	ess (P.O. Box Number is Not Acceptabl	e)		
	RASOTA FL 34236		}	63		10 - 10 - 10 - 10 - 10 - 10 - 10 - 10 -			
			}	84	City			85 Zip	Code
					•	oration submits this statement for the pu on's board of directors. I hereby accept	FL		
12.		AND DIRECTORS	13.			ed when reinstalling) ADDITIONS/CHANGES TO OFFICE	·		
TILLÉ	D	DELET	E 1.1 TH	TLE		· · · · · · · · · · · · · · · · · · ·		Change	Addition
NAME	VALENTICH, MICHAEL A.		1.2 NA						
STREET ADDRES	S 2486 WATERVIEW CT SARASOTA FL				ADDRESS				
	I ORDROUIS EL		1.4 CIT	1Y-\$1	1 - ZIP				
CITY-ST-ZIP		DELET	E 21 Tr	TI F			·····	Change	Additio
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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.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/9/97

941-365-5111