## 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 # K36494

(8)

KERN & ZIONTZ, P.A.

Principal Place of Business Mailing Address								r nationit and tonk dien minn inner one	#14f1 #141f (		. 61611 1061
6550 N FEDERAL HWY				8550 N FEDERAL HWY				İ			
STE 220				STE 240							
FT. LAUDERDALE FL 33308 US				FT. LAUDERDALE FL 33308-1400 US				3. Date Incorporated or Qualified	lee D	ite of Last f	20004
							10/03/1988		01/1996		
2. Principal P	lace of Busin	iess	2a.	Mailing Address				4. FEI Number			pplied For
21		A. AT - 1.11. 1711 1 - 1.11. 1.11 1.11 1.11 1	26					65-0073811			ot Applicable
Suite, Apt. #, etc.				Suite, Apt. #, etc. 27 Suite 220				Certificate of Status Desired     Sa.75 Additional Fee Required			
City & State				City & State				6. Election Campaign Financing \$5.00 May Be			
23				28				Trust Fund Contribution Added to Fees			
Zip	Zip Country			Zip Country			7	8. This corporation has liability for intangible tax under s. 199.032,			
24	25 29			30			Florida Statutes 🔀 Yes 🗌 No				
	9, Name	and Address of Curre	nt Regis	tered Agent		ļ		10. Name and Address of New Re	gistered	Agent	
ZIOI	NTZ, HARO	LD M				81	Name				
6550 N FEDERAL HWY., STE. 220				82 Street Ad			Street Add	dress (P.O. Box Number is Not Acceptable)			
FT LAUDERDALE FL 33308				GE Stiedt /			Oli Got Flac	aleas (1.50) pay Halillon in Hali Franchistano)			
, , ,	_ ,,,,,,,,			•		83					
						_	0	,		71	
						84	City		FL	85 Zip	Code
11. Pursuant	to the provisi	ions of Sections 607.05	02 and 6	07.1508, Florida Statu	ites, the a	ibov	e-named cor	rporation submits this statement for the	ourpose of	changing	its registered
office or r agent 1 a	registered ag am familiar wil	ent, or both, in the Stat th, and accept the obli	e of Florid pations of	da. Such change was f, Section 607.0505, F	authorize lorida Sta	ed by	y the corpora s.	ation's board of directors. I hereby acce	pt the app	ointment a	registered
SIGNATURE											
	Signature, typed	or printed name of registered as				ed Ap	ent signature requ	uirad when reinstaling)	DATE		
12.	· · · · · · · · · · · · · · · · · · ·	OFFICERS AF	ND DIREC		13.			ADDITIONS/CHANGES TO OFFI	ERS AND		
TULE	PD			☐ DELETE	1.1 3	ΉTL€				Change	Addition
NAME	KERN, R				1.21	IAME					
STREET ADORESS		FEDERAL HWY.			1.3 5	STREET	T ADDRESS				
CITY-ST-ZIP		erdale fl			1.4 (	HY-	ST-ZIP		<del></del>	<u> </u>	
TITLE	VD			☐ DELETE	2.1 1	IITLE				Change	Addition
NAME	ZIONTZ,	HAROLD M			2.21	VAME					
STREET ADORESS	6550 N F	FEDERAL HWY.			2.3 5	TREET	T ADDRESS				ļ
CHY+ST-7#P	FT LAUD	erdale fl			2.4	CITY -	ST-ZIP				
TITLE				☐ DELETE	3.11	TITLE		<del></del>		Change	Addition
NAME					3.2 (	NAME					
STREET ADDRESS					3.3 5	STAEE1	T ADDRESS				
City-St-ZiP					34.	CITY-	ST-ZIP				
Title				DELETE	4.11	TITLE				Change	Addition
NAME					4.21	NAME					
STREET ADDRESS					4.3 \$	STREET	T ADDRESS				
CITY-ST-ZIP					4.4 (	ary-s	ST-ZIP				
TITLE				☐ DELETE	5.1 1	TITLE				Change	Addition
NAME					5.21	VAME					
STREET ADDRESS							T ADDRESS				
CITY-ST-7IF							ST-ZIP	2			
TITLE				DELETE		TITLE			· · · · · · · · · · · · · · · · · · ·	Change	Addition
HAME				-	4	VAME				•	
STREET ADDRESS							T ADDRESS	•			
STATEL MUUNT 55					0.33	o inct	ו הטטחניים				

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

(954) 771-0322

**FILED** 

Apr 23 1997 8:00am

Secretary of State