## 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 # K47529

(8)

ORFELY	ENTERPRISES INC.				
				A ENGLESIA EN BARA ENGLES ALLES ALERE	DIANG BIRNG BIRNG BIRNG BIRNG BIRNG BIRNG
Principal Place		Making Address			Miller diebit Gidil Affil dillif Drait fabl
% GEORGE P	orfely <del>Keway South -</del>	% GEORGE P ORFELY	d		
- MIAMI LAKES		MIAMI LAKES FL 88014-2745	•		·
				3. Date Incorporated or Qualified	3a. Date of Last Report
				11/21/1988	03/25/1996
······· / • • • · · · · · · · · · · · ·	lace of Business	2a. Mailing Address	1. K.	4. FEI Number	Applied For
21 /35 S	45 Miami Lakeway No	26 53 45 111/A Suite Apt. #, otc.	AMI LAKEWI	y M 65-0093583	Not Applicable
22 #	204	27 # 205	+	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	MI LAKES, FL	28 MIAMI LAK	les FL	Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for	intangible tax under s. 199.032,
24 3 30 /		29 33014 30	USA		Yes No
	9. Name and Address of Current	Registered Agent	09 110	10. Name and Address of New Re	gistered Agent
ORFELY, GEORGE P.				reorge PU	Ktely
6430 MIAMI LAKEWAY SOUTH 82 Styeet Address				ddress (P.O. Box Number is Not Acceptat	)(g) Va
-MIAMI-LAKES FL 33014			83	545 MAMI C	ALEMAY IV.
				# 204	
			84 City	MIAMI LAKES	FL 85 Zip Code
11. Pursuarit	to the provisions of Sections 607,0502	and 607.1508, Florida Statutes,	the above-named	corporation submits this statement for the p	ourpose of changing its registered
office or registive diagent, or both, in the State of Florida, Suct 7 shange was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am fair with and accept the appointment as registered agent. I am fair with and accept the appointment as registered					
SIGNATURE	done of C	Trely Di	entro		2-15-97
	Stgrams, typed or to a circume of registered agent		egistered Agent signature		DATE
12.	OFFICERS AND	DELETE	13.	ADDITIONS/CHANGES TO OFFIC	Change Addition
NAME	ORFELY, GEORGE	bterre	12 NAME	_	* *
STREET ADDRESS	-8430 MIAMI LAKEWAY SOUTH		13 STREET ADDRESS	15545 MIAMI LAKEN	UAY N # 204
CCTY+S1+ZIP	MIAMI LAKES FL		1.4 CITY-ST-ZIP	15545 MIAMI LAKES MIAMI LAKES	=L 33014
TITLE	-0-	DELETE	2.1 TITLE		Change Addition
NAME	*ORFELY, SUSAN		2.2 NAME	Delete	
STREET ADDRESS	6430 MIAMI LAKEWAY SOUTH	, and the second	2.3 STREET ADDRESS		
C:TY - ST - ZIP	*MAMI-LAKES FL*		2. 4 CITY - ST - ZIP		
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CHY-ST ZIP		I Delete	3.4. CITY-ST-ZIP		Change Addition
TITLE		DELETE	4.1 TITLE		Change Addition
NAME CARLLA DOMESTIC			4. 2 NAME		
SIRSELADDRESS CHY-SI ZUF			4.3 STREET ADDRESS 4.4 CITY-ST-ZIP		
THLE		DELETE	5.1 TITLE		Change Addition
NAME		_	5.2 NAME		
STREET ADORESS			5.3 STREET ADDRESS		
CITY ST 7/F			5.4 CITY - ST - ZIP		
1 ILE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STHEET ADDRESS			63 STREET ADDRESS		
CITY S1-ZIP			6.4 CITY - ST - ZIP		
14. I do hereb	by certify that the information supplied :	with this filing does not qualify f	or the exemption st	ated in Section 119.07(3)(i), Florida Statute	s. I further certify that the

can be used by coming that the information is upplied with this filling does not quality 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 have 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 3 shanged, or on an attachment with an address.

**FILED** 

Feb 10 1997 8:00am

Secretary of State