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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K51255

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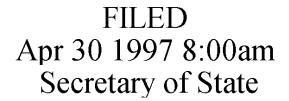
GROUP FINANCIAL SERVICES, INC.

Principal Place of Business

Mailing Address

1150 KANE CONCOURSE 3RD FLOOR

1150 KANE CONCOURSE 3RD FLOOR





BAY HARBOR ISLANDS FL 33154			BAY HARBOR ISLANDS FL 33154-2053							
							3. Date Incorporated or Qualified 12/14/1988	3a. Da 03/2	te of Last F 1/1996	Report
	Principal Pi	ace of Business	2a. Mailing Address			4. FEI Number 65-0091069	\	—	pplied For	
21]	Sulte, Apt. #, etc.		Suite, Apt. #, etc.			03 000 1000			ot Applicable Additional	
22	2		27			5. Certificate of Status Desired			equired	
23	City & State	•	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
	Zip	Country	Zip	Co	untry		8. This corporation has liability for it	ntangible		
24		25	29	30			Florida Statutes	Yes 🙎	No	
9. Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent				
SF&F RESIDENT AGENTS, INC.						Name				
		S. BISCAYNE BLVD.			62	Street Ad	dress (P.O. Box Number is Not Acceptab	le)		
SUITE 4310										
	MIAN	AI FL 33131			83					
					84	City		FL	85 Zip	Code
44	Price rant t	to the provisions of Sections 607 0503	2 and 607 1508 Florida Statu	tos the	1 l	named co	rooration cultimite this statement for the ro		changing i	te registered
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.										
SIG	BNATURE .	Signature typod or printed name of registered ager	nt and title if applicable (NO	TL Register	ed Agent	signature req	ulred when reinstating)	DATE		
12		OFFICERS AND	D DIRECTORS	18			ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTO	RS IN 12
TITI	£	PD DELET		1.1	IIILE				Change	Addition
NA	AE .	KLEIN, HARVEY	1.2		NAME					
STR	EET ADDRESS	1150 KANE CONCOURSE	1.3		STREET AL	DDRESS				
CIT	Y-ST-ZIP	BAY HARBOR ISLANDS FL		1.4 (7IP				
TITI	Y	STD	☐ DELETE	☐ DELETE 2.1 1		- 1			L Change	Addition
NAI		BEHAR, SABY		2.2 NAME						
STR	EET ADDRESS	1150 KANE CONCOURSE			2.3 STREET ADDRESS					
	Y-ST-ZIP	BAY HARBOR ISL. FL	- OF ST	2. 4 CITY-ST-ZIP		- ZIP	· · · · · · · · · · · · · · · · · · ·		T-1-2	The same
TITL		VAINETEIN GODV	☐ DELETE		TITLE				Change	Addition
NAI	THEN MANE CONCOUNCE		The state of the s		3.2 NAME 3.3 STREET ADDRESS					İ
	REET ADDRESS	BAY HARBOR FL				1				
CIT	Y-ST-ZIP	DATTIANDONTE	DELETE	3.4 CITY-S1-ZIP 4.1 TITLE		- ZIP			Change	Addition
				4. 2 NAME					briango	LJ Madicali
	NAME Street Address			4.3 STREFT ADDRESS		nnacee				
CITY-ST-ZIP				4.4 City - St - ZIP		I				
TITL		N-En			5.1 1/1LE				Change	Addition
	IAME		☐ DELETE	5.2 NAME					_	_
	STREET ADDRESS			5.3 STREFT ADDRESS		DDRESS				
	Y-ST-ZIP			5.4 CITY- ST- ZIP						
TITLE			DELETE		6.1 TITLE				Change	Addition
NAI				621	NAME					
	EET ADDRESS	1		6.3 5	STREET AL	DDRESS				
	Y-ST-ZIP	//	\sim	-	CITY-ST-]				
	. I do hereb	by certify that the information supplied	with the filling does not qual	lify for the	e exem	notion state	ed in Section 119.07(3)(i), Florida Statutes	s. I further	certify that	t the
	intormatio	n indicated on this annual report or sifficer or director of the corporation or	upple white: annual report is the speiyor or trustee empor	true and wered to	execur execur	ate and th te this rep	at my signature shall have the same lega ort as required by Chapter 607, Florida S	i effect as latules; ar	ਜ਼ made ur nd that my	nder oath; that name