## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

FTZ GROUP, INC.



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K57581

(6)

FILED
May 06 1997 8:00am
Secretary of State

1	

1100 NE 7TH SUITE A		Mailing Address 1100 NE 77H AVE SUITE A	1100 NE 7TH AVE			3. Date Incorporated or Qualified 01/11/1989 05/09/1996			
DANIA FL 3300 US	V4-10U2	_							
	Place of Business	28. Mailing Address	***************************************		······································	4. FEI Number	<u> </u>	<del></del>	pplied For
21		26	26			<b>65-0246906</b> Not Applic			ot Applicable
; Suite, Apt	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional
22		27			<del></del>				equired
City & Sta	IT()	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
<b>23</b>	Country			untry		Trust Fund Contribution		<del></del>	
24	25	29	30	uniny		This corporation has liability for Florida Statutes		tax under s ] No	3 199.032,
24]	9, Name and Address of Curre		30	T	····	10. Name and Address of New R			
EDV	WARD, HOUSTON J			81	Name		<del></del>		
	O NE 7TH AVENUE			82	Chant Add	roce (D.O. Day Number is Not Assente	blo)	<u> </u>	
	TE A			02	Street AGO	ress (P.O. Box Number is Not Accepta	DIG)		
	NIA FL 33004			83					
				84	City			<b>85</b> Zip	Code
				34	City		FL	lea vib	Jude
SIGNATURE		ND DIRECTORS	OTE: Register		ent signature requi	ired when reinstating) ADDITIONS/CHANGES TO OFFI	DATE CERS AND		
TITLE	PD	DELETE	1.1	TITLE				Change	Addition
NAMÉ	HOUSTON, J. EDWARD		1.2	NAME	1				
STREET ADDRESS			1,3	STREET	ADDRESS				
CIY ST 7IP	DANIA FL	Dr. Dr.		CITY-S	ST-ZIP			110	Laure
TITLE	TAGG, JOANN H.	DELETE	- 1	TITLE				☐ Change	Addition
NAMI COSTO ALGORIO	1100 NE 7TH AVE #A			NAME CANCET	Annorra	•			
STREET ADDRESS	DANIA FL		1		ADDRESS				
CHY-SE-209 MILE		DELETE		CITY - S	ST-ZIP	· · · · · · · · · · · · · · · · · · ·		Change	Addition
NAME		F-3 0 - 47.11		NAME				Aming Committee	the control
STREET ADDRESS					ADDRESS	•			
CHY ST-7P			•		ST-ZIP				
TillE		DELETE		TITLE			······································	Change	Addition
NAME			4 2	NAME					
STREET ADDRESS			4.3	STREET	ADDRESS				
CHY-SI-76			4.4	CITY - S	ST-ZIP				
TITLE		☐ DELETE		FITLE				Change	Addition
NAVE				NAME					
STREET ADDRESS			1		ADDRESS				
CHY-SI-ZIP	**************************************	Drive		CITY - S	ST-ZIP			T Chart	1227
Ti*LF		☐ DELĒTE		TITLE				Change	Addition
NAME				NAME					
STHEET ADORESS					ADDRESS				
(01Y-S1-7)P	1		6.4	CITY-5	37-ZIP				

14. If 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** 

SCHATTURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR