## 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

**FILED** 

Jul 01 1997 8:00am

Secretary of State

DOCUMENT # K77378

(3)

			ATURES, INC			(0)							1811 81811 81811		<u> </u>	<b>4</b> (8)(18 <b>14</b> )
											_					
Principal Place of Business  B S. 'J" ST. #3  LAKE WORTH FL 33460					Mailing Address PO BOX 1349 LAKE WORTH FL 33460-1349 US							1 08512111 011 10011 10020 11111 10020				
									3. Date Incorporated or Qualified					eporl		
2. Principal F	Place of Busi	<b> </b>	2e. Mailing Address							4. FEI Number		_	Ap	plied For		
Suite, Apt.	# etc	26	Suite Apt. #, etc.						-	65-0125796				t Applicable		
22	, 0,0.		27	27							5. Certificate of Status Desired				Additional equired	
City & Stat	le		City & State						1	6. Election Campaign Financing				May Be		
23			28	28							Trust Fund Contribution				o Fees	
Zip	Country			-	Zip			Country				8. This corporation has liability			der s.	199.032,
24	9, Name and Address of Current					29 30					Florida Statutes Yes No  10. Name and Address of New Registered Agent					
RAT	TES, WILLIA			ent neg	jis tere	a Agent		81	Т	Name	יו	U, Name and Address of New	Registered	Agent		
		L.L.														
307 SOUTH O STREET LAKE WORTH FL 33460									82 Street Addre			(P.O. Box Number is Not Acce	otable)			
						83	1				· · · · · · · · · · · · · · · · · · ·			·		
								84	-	City				<del></del>		
									ı	•			FL	85	Zip (	
11. Pursuant office or ragent. I a	to the provis registered ag im familiar w	ions jent, ith, a	of Sections 607.0! or both, in the Sta nd accept the obl	502 and to of Flo igations	607.1 orida. S of, Sec	508, Florida Statu Juch change was ction 607.0505, F	ites, auth Iorid	the aboviorized b a Statute	e-i y ti	named corpo he corporation	orat on's	ition submits this statement for the sound of directors. I horeby ac	ne purpose o ccept the app	f chang pointme	jing its nt as	s registered registered
SIGNATURE																
12.	Signature, typed	or pre	nted name of registered a OFFICERS A	···			TE: Re	gistered Ag	ent	eriuper etutangia	d wi	hen reinstating) ADDITIONS/CHANGES TO OF	DATE EICERS AND	DIDEC	TOP	C IN 10
TITLE	D					DELETE		1.1 TITLE				NODITIONO/OFIANGEO TO OF	TIOENS AN	Cha		Addition
NAME	BATES, \	MILL	IAM C.					1.2 NAME								
STREET ADDRESS	EET ADDRESS 307 SOUTH O STREET							1.3 STREET	STREET ADDRESS							
CITY-ST-ZIP	LAKE W	ORTI	1 FL					1.4 CITY-	1.4 CITY-ST-7IP							
TITLE	D					DELETE		2.1 TITLE						Cha	ange	Addition
NAME	LUTZ, BY							2.2 NAME								
STREET ADDRESS			K STREET					2.3 STREE	2.3 STREE1 ADDRESS							
CITY-ST-ZIP	LAKE W	JKII	1 PL			25,55		2.4 CITY-	ST-	- ZIP						
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NAME OTREET ARRESTO								3.2 NAME								
STREET ADDRESS								3.3 STREE								
CITY-ST-ZIP TITLE		—-				DELETE		3.4. CITY- 4.1 TITLE	\$T-	ZIP				☐ Cha	2000	Addition
NAME						bud vection		4.2 NAME							311BC	LI NUCIDII
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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 or on an attachment with an address.