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



## Sandra B. Mortham

LILLD
Apr 24 1997 8:00am
Secretary of State

F	ILE NOW: FILING FE	E AFTE	R MAY 1 IS	\$550.00	F	ILED
COF ANNU	PROFIT RPORATION JAL REPORT 1997		FLORIDA DEPA Sandra I Secrete	RTMENT OF STATE  B. Mortham  ary of State  CORPORATIONS	1	.997 8:00a ary of State
Principal Plac		Ma:	(2) ling Address HARLES F. POSESS			
7015 BERACA: BOCA RATON	FL <b>33</b> 433		5 BERACASA WAY #1 CA RATON FL 33433-3		3. Date Incorporated or Qualified 07/17/1989	3a. Date of Last Report 04/29/1996
	Place of Business	k	Mailing Address	/	4. FEI Number	Applied For
1 Culto Act	# ata	26	Quito Ant # etc		65-0148212	Not Applica
Sulte, Apt.	π, σιυ.	27	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	ie	(	City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	28	7 <sub>ID</sub>	Country	Trust Fund Contribution  8. This corporation has liability for	
֓֟֞֝֝֟ <u>֚</u>	25	29	•	30		Yes No
office or a agent. I a					rporation submits this statement for the alion's board of directors. I hereby acce	
12.	Signature, typed or printed name of registered OFFICERS	AND DIRECT		It : Registered Agent signature req	ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTORS IN 12
TITLE	Db		DETEJE	1.1 TITLE	7.02.00.00,07.1.102.07.00.1.10	Change Addi
NAME Street address City-St-21P	POSESS, CHARLES F. 7015 BERACASA WAY #20 BOCA RATON FL	1		1.2 NAME 1.3 STREET ADDRESS 1.4 CHY+ST-74P		
TITLE VAME STREET ADDRESS CITY-ST-ZIP	DVP WALSER, THOMAS C. 7015 BERACASA WAY #20 BOCA RATON FL	1	☐ DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP		☐ Change ☐ Addi
ITLE  LAME STREET ADDRESS			DELETÉ	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS		Change Add
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TITLE NAME STREET ADDRESS			DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS		Change Add
ATY-SI-ZIP			·	6.4 CITY - ST- 7(P		
	by cartify that the information curve					

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 131 charged or in an affection with an address