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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Mar 28 1997 8:00am

Secretary of State

954-780-0288

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # L25882

(6)

SIGNATURE:

CLUB FO	ORTUNE, INC.				
Principal Place	of Business	Mailing Address		E TO MITON IN THE LIBERT DATES IN THE LIBERT STATE OF STA	ABUS BURUS BURUS BURUS BURUS BURUS INDI
9621 WEST SAMPLE ROAD CORAL SPRINGS FL 33365 US		9621 WEST SAMPLE ROAD CORAL SPRINGS FL 33065-4 US	CORAL SPRINGS FL 33065-4001		
				3. Date Incorporated or Qualified 10/26/1989	3a. Date of Last Report 05/01/1996
	lace of Business	2a. Mailing Address	8651	4. FEI Number	Applied For
21	# 210	26 P.O. BOX Suite, Apt. #, etc.	0001	65-0171564	Not Applicable \$8.75 Additional
Suite, Apt. #, etc. 22		27 COral Spa	5 1 -	5. Certificate of Status Desired Fee Required	
City & State	0	City & State	777	6. Election Campaign Financing	\$5.00 May Be
23		28 COral Spri	rgs FL	Trust Fund Contribution	Added to Fees
Zφ	Country	Zip	Country	8. This corporation has liability for in	frangible tax under s. 199.032, Yes No
24	9. Name and Address of Curre		10 USA	Florida Statutes V 10. Name and Address of New Feb.	· · · · · · · · · · · · · · · · · · ·
		aur Dedigreten Waerr	81 Name	JO: Hallo Bilo Accioso of How you	
	ISEY, GERALD 1 SAMPLE RD.				
	RAL SPRINGS FL 33365		82 Street Ad	dress (P.O. Box Number is Not Acceptable	6)
COn	ME OLUMOO LE OOOO		83		
			84 City	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	85 Zip Code
			111 1	orporation submits this statement for the pation's board of directors. I hereby accep	FL
SIGNATURE 12.	So a solute - hypertice people of name of he gosterod a OFFICERS A	ngent and title of apposciable. (NOTE: ND DIRECTORS. DELETE	Registered Agent signature rec 13. 1.1 TITLE	ulted whon reinstating) ADDITIONS/CHANGES TO OFFICE	DATE ERS AND DIRECTORS IN 12 Change Addition
NAME	KAHN, ROBERT	/ \	1.2 NAME	Senta Harry IN I	1 -
STREET ADDRESS	9621 W. SAMPLE ROAD		1.3 STREET ADDRESS	7 12/1	24e
CITY - \$1 - ZIP	CORAL SPGS. FL		1.4 CITY-ST-ZIP		Dobas Value
THUE		☐ DELETE		serald Hersey DO	Change Addition
NAME				1621 W. Sumple Rd.	
STREET ADDRESS			Eld Office / Facilitation	coral springs FL	33065
C-TY - S1 - 74P TITLE		DELETE	2 4 CITY-ST-ZIP 3.1 TITLE	0.01 795 1 -	Change Addition
NAME			3.2 NAME		_ ,
STREET ADDRESS			3.3 STREET ADDRESS		
City - \$1 - Zif			3.4. CITY - ST - ZIP		
DILE	AAAAAAA TA'	DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CHY-ST-ZP			4.4 CiTY-ST-ZIP		1 0 1 1 4 100
TITLE		DELETE	5 1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
CITY ST-Ziff		DELETE	5.4 CITY-ST-ZIP		Change Addition
TIBLE		ריין הנוגונ	6.1 TITLE		C Auralia C Monthon
NAVE			6.2 NAME 6.3 STREET ADDRESS		
STREET ADDRESS		A 1	6 A CITY ST. 7IP		
14. Loo here	L. by certify that the information suppl	lied with this filing does not qualif	y for the exemption sta	ted in Section 119.07(3)(i), Florida Statute	s. I further certify that the
information and appears	on indicated on this annual resort of officer or director of the equiposation in Block 12 or Block 13 liceninged	or supplemental annual report is to or the receiver or trusted annow or on an attachment with in add	ue and accurate and the gred to execute this repress.	ted in Section 119.07(3)(i), Florida Statute nat my signature shall have the same lega port as required by Chapter 607, Florida S	I effect as if made under oath; tha statutes; and that my name