

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.  
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)


FILED

97 JUL 25 AM 10:29

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



DO NOT WRITE IN THIS SPACE

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # L26511 (0)  
1. Corporation Name  
YEEND CORPORATION

Principal Place of Business  
1109 S CONGRESS AVE  
WEST PALM BEACH FL 33406  
US

Mailing Address  
1109 S CONGRESS AVE  
WEST PALM BEACH FL 33406  
US

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc.	Suite, Apt. #, etc.
22	27
City & State	City & State
23	28
Zip	Zip
Country	Country
24	25
29	30

3. Date Incorporated or Qualified 10/30/1989	3a. Date of Last Report 04/22/1996
4. FEI Number 65-0150291	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent

YEEND, JOHN M  
1109 SOUTH CONGRESS AVE  
WEST PALM BEACH FL 33406

10. Name and Address of New Registered Agent

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City  
FL 85 Zip Code

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.

SIGNATURE John M. Yeend DATE 7-21-97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	YEEND, JOHN	1.2 NAME	000002256280--5
STREET ADDRESS	1564 WOODS BEND RD	1.3 STREET ADDRESS	-08/04/97--01069--002
CITY-ST-ZIP	WEST PALM BEACH FL	1.4 CITY-ST-ZIP	****165.00 ****165.00
TITLE	VS	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PAJENSK, LORI	2.2 NAME	
STREET ADDRESS	1027 AVIARY RD	2.3 STREET ADDRESS	
CITY-ST-ZIP	WELLINGTON FL	2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		3.2 NAME	T CARLOS R. CASTANEDA
STREET ADDRESS		3.3 STREET ADDRESS	1109 SOUTH CONGRESS AVE.
CITY-ST-ZIP		3.4 CITY-ST-ZIP	WEST PALM BEACH, FL 33406
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 in 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 John M. Yeend DATE 7-21-97 561-447-4200

CR2E034 (4/97)

2-2

**YEEND CORPORATION**  
*Accountants and Tax Specialists*  
**1109 South Congress Avenue**  
**West Palm Beach, Florida 33406**

**John Yeend, EA, Senior Partner**  
**Carlos Castaneda, Accounting Manager**  
**Michelle Menown, Accounting Manager**  
**Lori Pajenski, Accounting Specialist**  
**Donna Melendez, Staff Assistant**  
**Angie Maccarelli, Intern**

**Phone # (561) 642-4200**  
**FAX # (561) 642-4325**

**July 21, 1997**

**Florida Department of State**  
**Division of Corporations**  
**P.O.Box 6327**  
**Tallahassee, Florida 32314**

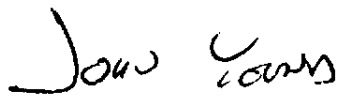
**Re: 1997 Profit Corporation Annual Report**

**Dear Sir/Madam:**

Enclosed is a check for \$165 for the Annual Filing fee. We did not receive the initial request concerning the 1997 Profit Corporation Annual Report. We hope you accept our sincerest apology.

Please contact us with any questions.

Sincerely,

  
**John Yeend**