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

**PROFIT** CORPORATION ANNUAL REPORT

1997

CHY-S1-ZIP

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 17 1997 8:00am

Secretary of State

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## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # L37217

(1)

## REEMARK FLORIDA MANAGEMENT, INC.

Principal Place of Business Mailing Address								int Athir Armii A	THE PROPERTY OF	
C/O RENE A. ( 4273 BOCA PO SARASOTA FL	INTE DRIVE	4273 BOC/	C/O RENE A. GAREAU 4273 BOCA POINTE DRIVE SARASOTA FL 34238-5575							
OARAGOTA TE	otevu	0,110,001					3. Date Incorporated or Qualifie 12/19/1989		ate of Last Re 29/1996	eport
2. Principa: P	lace of Business	2a. Mailin	2a. Mailing Address				4. FEI Number		Ap	plied For
21		26	26				<b>65-0164936</b> Not Applicab			t Applicable
Suile, Apt	#, etc.	Suite,	1.75.4				5. Certificate of Status Desired			
City & Stat	0	City & <b>28</b>	City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
Zip	Country	Zip	Zip Country				8. This corporation has liability for intangible tax under s. 199.032,			
24	25 29 30		30	Florida Statutes			Yes No			
	9. Name and Address of Cu	rrent Registered /	\gent				10. Name and Address of New	Registered	Agent	
	e a. gareau				81 Na	ıme				
4273 BOCA POINTE DRIVE					B2 St	eet Addre	Address (P.O. Box Number is Not Acceptable)			
SAR	ASOTA FL 34238				83					
									<del></del>	
					<b>84</b> Ci	·		FL		
11. Pursuant office or r	to the provisions of Sections 607. egistered agent, or both, in the S	0502 and 607.150/ tate of Florida. Suc	3, Florida Statu h change was	tes, the a authorize	oove-na d by the	med corpo corporatio	oration submits this statement for the on's board of directors. I hereby ac-	e purpose o cept the apr	t changing it: pointment as	s registered registered
agent La	m familiar with, and accept the o	bligations of, Section	on 607.0505, Fi	orida Stat	utes.			21	10-1	
SIGNATURE			5	RENE	A. (	AREAU	]	1101	9/	
	Signature, typed or printed name of registere		(NO		d Agent sig	nature require	d when reinstating)	DATE	- DIDEOTOR	0 (1) 40
12.	PD	AND DIRECTORS	DELETE	13.	T. E	<del></del>	ADDITIONS/CHANGES TO OF	-IUERS AND	Change	Addition
TITLE	FENTON, SHELDON C.		otter	- 1					DEI change	L) Addition
NAME				1,2 N						İ
STREET ADDRESS	149 DUNVEGAN RD.	ANO AA	1.3 STRE				AD ONO			ļ
CITY - ST - ZIP	TORONTO-ONTARIO- M5P	ZINO CA.	DELETE		TY-ST-ZIP	M4	4P 2N8		T 0	- Land Address
TITLE	DCS		DELETE	21 TI		ŀ			Change	Addition
NAM[	GAREAU, RENE A.			2.2 N		ļ				
STREET ADDRESS	4273 BOCA POINTE DRIVE				reet add <del>f</del>	2.4				
CITY-S1-7P	SARASOTA FL		T-2 per ere		ITY-ST-ZII	34	1238			1 4 1 100
TiTLE	VT		DELETE	3.1 TI	TLE	ļ			Change	Addition
NAME.	FENTON, BARRY ROBERT			32 N	ME					
STREET ADDRESS	71 ORIOLE ROAD, UPPER			3.3 S	REET ADDR	ESS				l
CITY- ST- ZIP	TORONTO, ONTARIO, CAN	AUA M4V -2E9	05.555		ITY - ST - ZII				T 05	Adde
TITLE			DELETE	4.1 Ti					Change	L.] Addition
NAME				4, 2 N	AME					
STREET ADDRESS					REET ADDI					
CITY-ST-ZIP			T proper		TY-ST-ZIP			<del></del>	770	
TITLE			DELETE	51 T		Į.			Change	Addition
NAME				52 N						
STREET ADDRESS				5.3 S	reet addf	£SS				
CITY-ST-7-F					TY - ST - ZIP					
TOTAL			DELETE	6.1 TI	TLE				Change	Addition
NAME				6.2 N	<b>IME</b>					
STREET ADDRESS				6.3 S	REET ADDR	ESS				

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 under oath; that I am an officer or director of the corporation of 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.