## 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

DOCUMENT # L52510

(9)

FILED						
May 13 1997 8:00am						
Secretary of State						

) DESIGN	IS BY M & J INDUSTRIES, I	NC.			
Principal Place of Business % GERALD W BENNETT 400 SW 12TH AVENUE BAY 4 POMPANO BEACH FL 33073		Mailing Address  % GERALD W BENNETT  400 SW 12TH AVENUE BAY POMPANO BEACH FL 3307		T 1.000(199) 096 07710 31901 07701 71011 0011 03	
US		US		3. Date Incorporated or Qualified 02/21/1990	3a. Date of Last Report 08/13/1996
<b>⊢</b>	Place of Business	2a, Mailing Address		4. FEI Number	Applied For
21		26		65-0175458	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc. 27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	B. This corporation has liability for inf	
24	25	29	30		Yes No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Regi	stered Agent
BEN	inett, gerald W.		81 Name		
	SW 12TH AVENUE BAY 4 MPANO BEACH FL 33069		82 Street Addr	ess (P.O. Box Number is Not Acceptable	<b>)</b>
	III AND DENOTITE COURS		83		
			84 City		FL 85 Zip Code
11, Pursuant office or r agent. I s	to the provisions of Soctions 607.0502 registered agent, or both, in the State am familiar with, and accept the obliga	hand 607.1508, Florida Statute of Florida. Such change was a tions of, Section 607.0505, Flo	es, the above-named corp uthorized by the corporati rida Statutes.	oration submits this statement for the purion's board of directors. I hereby accept	rpose of changing its registered the appointment as registered
SIGNATURE					
	Signature, typed or printed name of registered ager		Registered Agent signature require	<del> </del>	DATE
12.	OFFICERS AND	DELETE	13.	ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTORS IN 12  Change Addition
NAME	BENNETT, GERALD W	Seech	1.2 NAME		C Guande C Madition
STREET ADDRESS	4100 POWERLINE RD, #H-1		13 STREET ADDRESS		
CITY-ST-ZIP	POMPANO BCH FL		1.4 CITY-ST-ZIP		
TITLE	8	DELETE	2.1 TITLE		Change Addition
NAME	BENNETT, GENEVIEVE		2.2 NAME		
STREET ADDRESS	4100 POWERLINE RD, #H-1		2.3 STREET ADDRESS		
CITY-ST-ZIP	POMPANO BCH FL		2 4 CITY-ST-ZIP		
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS	]		3.3 STREET ADDRESS		
CITY-ST-ZIP			3 4. CITY - ST - ZIP		
TITLE		DELETE	4.1 Title		Change Addition
NAME			. 4. 2 NAME		
STREET ADDRESS	2.0		4.3 STREET ADDRESS		
CITY+ST-ZIP		DELETE	4.4 CITY-ST-ZIP		Chaper Addition
TITLE	·	. DELETE	5.1 TITLE		Change Addition
NAME CYNET ADDRESS			5 2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP	<del></del>	DELETE	5.4 CITY - S1 - 7IP 61 TITLE		Change Addition
NAME			62 NAME		
STREET ADDRESS	1		6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY - ST - 7IP		

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 eath, 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: