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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT #L62328

FILED 97 MAY -2 AM 8: 44 SECRETARY OF STATE

DC	ON ROGERS PHOTO,	TALLAHASSEE, FLURIDA							
		Mailing Address							
Principal Place									
2610 SCOTT ST 2610 SCOTT ST									
HOLLYWO	OOD, FL 33020 HO	DLLYWOOD, FL 3	3020	'	ı				
:				.:		3. Date incorporated or Qualified 4/4/90	Sa. Date of Last	Report	]
2. Principal Pla	ace of Business	2a. Mailing Address				4. EEL Number 2807	T I	Applied For	1
21				05-0102007		Not Applicable	1		
Suite, Apt. #, etc. Suite, Apt. 22			#, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State City & State						6. Election Campaign Financing \$5.00 May Be			1
23		28						d to Fees	
Zip 24	Country 25	Zip	Cour	ntry		8. This corporation has flability for intengible tax under s. 199 Florida Statutes Yes No		s. 199.032,	]
1541	9. Name and Address of Current		1001			10. Name and Address of New Regis		<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>	┥
				81 N	ame			<del></del>	1
	DONALD D., JR.		ŀ	82 S	treet Addre	ss (P.O. Box Number is Not Acceptable)			-
2610 SC	<del>-</del>		}	83		· · · · · · · · · · · · · · · · · · ·		<del></del>	4
HOLLYWO	OOD, FL 33020		,						_
			İ	1	lity	d .	FL	p Code	l
11. Pursuant to	the provisions of Sections 607.0502	and 607.1508, Florida Statut	les, the ab	ove-na	med corpo	oration submits this statement for the pur on's board of directors. I hereby accept t	pose of changing	its registered	1
agent. I an	n familiar with, and accept the obligat	ions of, Section 607.0505, Fi	orida Stati	ules.				10 / 10 / 10 / 10 / 10	
SIGNATURE _									}
12.	Signature, typed or printed name of registered agent OFFICERS AND		E: Registered	Agent si	gnature require	d when reinstating)  ADDITIONS/CHANGES TO OFFICE	DATE	ODC IV. 10	┤┈
TITLE	DPS OFFICERS AND	DELETE	1.1 717	) F		ADDITIONS/CHANGES TO OFFICE	Chang		CRZE034 (9/96)
NAME	DOCEDS DONALD D ID		1.2 NA				Can Vining		150
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CITY-ST-ZIP	HOLLYWOOD, FL	33020		Y-\$T-ZI	1				띯
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NAME			2.2 NA						1
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CITY-ST-ZIP				TY-ST-2	1 1	~U3/Ub/	2 DU **	)U10	
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NAME			3.2 NA	ME					1
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NAME 3			4.2 N	AME :					
STREET ADDRESS			4.3 \$7	REET ADD	PRESS				
CITY-ST-ZIP			4.4 (1)	1Y-S1-21	P				_[
TITLE		☐ DELETE	5.1 TIT	LE		p.	Chang	Addition	1
NAME			5.2 NA	ME					
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CITY-ST-ZIP			5.4 CI	TY-ST-2	P .				
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NAME		,	6.2 NA	WE		( Al ).	M (	1 -	1
STREET ADDRESS			6.3 ST	REET ADE	PRESS	(15/1	7	7.	1
CITY-ST-ZIP				TY - \$1 - ZI		401		<del></del>	_
I 14 I do bereb	v certify that the information supplied	WITH THIS THING GOOS NOT CHAI	ITV IOT THE	BXAMO	Diels nord	In Section 119.07(3)(i). Florida Statutes.	ı turiner Cethiv İf	at ine	1

I do nereby definy that the information supplied wint this limit does not qualify to the exemption stated in Section 113.07(3)(), Postua Statutes, 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:

TOWATURE AND TYPED OR PRINTED NAME OF MORRIS DYFICER OR DIRECTOR