## 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 # L72427

(2)

MARK L. ANGERT, P.A.

FILED
Jan 14 1997 8:00am
Secretary of State



Principal Placi	e of Business	Maiing Address	Maiing Address								
2021 EAST CO STE. 304	NAMERCIAL BLVD.	2021 EAST COMMERCI STE, 304	2021 EAST COMMERCIAL BLVD.								
FORT LAUDER	DALE EL 39908	FORT LAUDERDALE FL	33308-3754								
TOM CAUDEN	Drick is didde	TOTAL STOCKING TO	TOTAL ENGLISHED TO GOOD OVER				3. Date Incorporated or Qualified				
2. Principal P	lace of Business	2a. Mailing Address					4. FE! Number				plied For
21		26					65-0221926		Ī	No	t Applicable
Suite, Apt	#, etc	Suite. Apt. #, etc.	Suite. Apt. #, etc.				E. Contificato of Ctubus Decised		\$8	.75	Additional
22		27					5. Certificate of Status Desired	L.,	F	ee Re	quired
City & State	0	City & State					6. Election Campaign Financing	)	\$!	5.00	May Be
23		28					Trust Fund Contribution				to Fees
Z)p	Country	Zip	Zip Country				8. This corporation has liability	for intangil	ole tax ui	nder s	199.032,
24	25 29 30			Florida Statutes Yes No							
	9. Name and Address of Currer	nt Registered Agent		ļ.,,			10. Name and Address of New	Registere	d Agent		
	BERT, MARK L.			81	Nan	ne					
2021 EAST COMMERCIAL BLVD.				82	Stre	et Addre	ess (P.O. Box Number is Not Accep	table)			
SUT			or o								
FOR	IT LAUDERDALE FL 33308			83							
				84	City				85	7in	Code
				"	City			F		Zip :	Code
11. Pursuant	to the provisions of Sections 607,050	02 and 607.1508, Florida Sta	atules, the a	bove	e-nam	ed corp	oration submits this statement for the	ne purpose	of chan	ging if	s registered
office or r	egistered agent, or both, in the State m familiar with, and accept the oblig	eof Florida, Such change wa lations of Section 607,0505.	as authorize . Florida Sta	o by tutes	the c	corporati	ion's board of directors. I hereby ac	cept the a	ppointme	ent as	registered
SIGNATURE		,	,								ļ
SIGNATURE	Signature, typed or porter came of registered again	ent and site Tapplicable (	NOTE: Registere	d Age	nt signa	iture require	ed when reinstating)	DATE			·
12.	OFFICERS AN	ID DIRECTORS	13.				ADDITIONS/CHANGES TO OF	FICERS A	ND DIRE	CTOR	S IN 12
THELE	D	DELETE	1.1 T	ITLE					☐ CI	hange	Addition
NAME	ANGERT, MARK L.		12 N	AME							
STREET ADDRESS	2021 E. COMMERCIAL BLVD.		13S	TREET	ADDRE	ss					
CITY+ST-ZIP	FORT LAUDERDALE FL		140	HY-S	T-ZIP	ĺ					
TITLE		DELETE	21 T	17LF			***************************************	***************************************	□ Cf	hange	Addition
NAME			2.2 N	AME		Ì					i
STREET ADDRESS			235	TREET	ADORE	ss					
CITY - \$T - ZIF					ST-ZIP						
TITLE	*	DELETE	311		211				L c	hange	Addition
NAME			3.2 N			ſ					_
STREET ADDRESS					ADDRE	22					
CITY-ST-ZIP					71.50NE	30					
TITLE		DELETE	41 T		J1 - 61F	_		*********	Пс	hange	Addition
NAME				NAME					_ •	- 0-	
STREET ADDRESS			1		ADDRE	, (					Í
CITY - ST-ZIP					T-ZIP						
TITLE		DELETE	517		11 - ZIP	+			C	hanne	☐ Addition
		ا مدر ال							ں ب		
NAME CROSET ADDRESS			52 N		. ABDOT						
STREET ADDRESS					ADDRE	30					ł
C:TY - ST - ZiP		DELETE		_	T-ZIP		<del>-</del>		<u> </u>	hange	Addition
TITLE		ב טנננונ	617						ши	- ស ខេត្ត - ស ខេត្ត	L Addition
NAME				IAMÉ							į
STREET ADDRESS					ADORE	SS					
CITY-ST-ZIF		a n N Note file - a			T-ZIP		15.0			E . 1C	11-
- ∎ <b>a</b> . I do ne/el	ny demiy mai me intornasion subbile	ia with this filling diffes not ai	DARBY TOP THA	PYA	หาดแก	n stated	Lin Section 119 07(3)(i). Florida Stat	wies I fud	ner certif	ov toat	rne i

To necesty certify that the information supplies with mis filing does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. 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 or the receiver or trustee empowered to execute his 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:

SIGNATURE AND TYPEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

7 77/--/// Daytime Prione #