## 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 # L77353

(5)

EDWARD M. LERNER, P.A.

Principal Place of Business Mailing Address  9306 CHELSEA DR. N.  PLANTATION FL 33324  US  Mailing Address  9306 CHELSEA DR. N.  PLANTATION FL 33324  US								
						3. Date incorporated or Qualified 06/04/1990 3a. Date of Last Re 06/17/1996	port	
2. Principal Place of Business		2a. Mailing Addre	28. Mailing Address 26			OF 0400000	plied For Applicable	
Suite, Apt. #, etc		Suite, Apt. #,	Suite, Apt. #, etc.			5. Certificate of Status Desired S8.75 A		
City & Sta	ale	City & State				6. Election Campaign Financing \$5.00 Trust Fund Contribution Added to		
Zip	Country 25	Zip 29	30 Cou	ntry		8. This corporation has liability for intangible tax under s. Florida Statutes	199.032,	
Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent			
l LE	rner, edward M.			81	Name			
	06 CHELSEA DR. N. ANTATION FL 33324		82 Street Addr		Street Addr	ress (P.O. Box Number is Not Acceptable)		
				83				
				84	City	FL 85 Žip (	ode	
11. Pursuan	it to the provisions of Sections 60	7.0502 and 607.1508, Florid	a Statutes, the at	oove	e-named corp	poration submits this statement for the purpose of changing its	registered	

istered office or registered agent, or both, in the State of Florida. Such change was authorized by agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE			
		: Registered Agent signature requ	
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	LERNER, EDWARD M.	1.2 NAME	
STREET ADDRESS	9306 CHELSEA DR N	1.3 STREET ADDRESS	
CITY - ST - ZIP	PLANTATION FL	1.4 CITY - ST - ZIP	
TOLE	DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME		2.2 NAME	
S1REE1 ADDRESS		2.3 STREET ADDRESS	
CITY - ST - ZIP		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		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 City - ST - ZIP	
TITLE	DELETE	5 1 TITLE	Change Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	Change Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	

Section 119.07(3)(i), Florida Statutes, I further certify that the signature shall have the pame legal effect as if made under oath; that required by Chapter 60°, Florida Statutes; and that my name I do hereby certify that the information supplied with information indicated on this annual report or supplied and officer or director of the corporation appears in Block 12 or Block 13 if chapters in proper to the corp

**FILED** 

Feb 18 1997 8:00am

Secretary of State