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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Jan 27 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M77291

(6)

EDWARD, INC.

SIGNATURE:

Principal Place of Bus	iness	Mailing Address			4 (OFFICE)? Net 120th 30th fluis indie indie dien Gibts einen dien dien bien aus		
337A ROYAL POINCIANA PLAZA PALM BEACH FL 33480		PALM BEACH FL 33480	337A ROYAL POINCIANA PLAZA Palm Beach Fl 33480-4019				
US		U\$			3. Date Incorporated or Qualified 04/21/1988	3a. Date of L 08/13/19	
2. Principal Place of Business		2a. Mailing Address			4, FEI Number	Applied For	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		· · ·	65-0044352 Not Applicable \$8.75 Additional		
22		27			5. Certificate of Status Desired	1 1 7 "	ee Required
City & State		City & State			6. Election Campaign Financing		.00 May Be
23		28	Cou	ntn (Trust Fund Contribution		ded to Fees
Zip 24	Country 25	[Zip [29]	30	rury	8. This corporation has liable for Florida Statutes	intangible tax un ☑ Yes ☐ No	der s. 199.032,
	ame and Address of Curr		1001	***************************************	10. Name and Address of New Re		
FLEMING,	FAITH			81 Name			
	JBLETREE CIRCLE			82 Street Add	ress (P.O. Box Number is Not Acceptal	ole)	
WELLINGT	ON FL 33414						
				83			
				64 City		FL 85	Zip Code
11 Pursuant to the n	ravisions of Sections 607.0	502 and 607 1508. Florida Sta	atutes the at	nove-named corr	poration submits this statement for the p	ourpose of chang	aina its reaistered
office or registere	ed agent, or both, in the Sta	te of Florida. Such change wingstions of, Section 607.0505	as authorized	d by the corpora	tion's board of directors. I hereby acce	pt the appointme	int as registered
SIGNATURE							
Saguratur,	typent or printed tions of registrand a			l Agent signatura requi		DATE	07000 11 40
12.	OFFICERS A	ND DIRECTORS DELETE	13.	nr	ADDITIONS/CHANGES TO OFFIC	CERS AND DIRE	
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	LINGTON FL		Λ.	1		0	
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NAME FLEI	MING, FAITH D.	`		tress	sarge.	dward Ja	•.
	1 DOUBLETREE CIRCLI	E			U	Ja	J.
CITY-ST-ZIP WEL	LINGTON FL						
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NAME		140	$\propto 0$	J /4	unsel to	i Œ	
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NAME STREET ADDRESS			F	-L 3	33418		
CITY-SI-ZP					, , ,		
TITLE				\cap			ition
NAME		not	1323	1 Nou	ublitree Circle	,	
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CITY ST-ZIP			معرا	my it	- 1 33414		****
TITLE			*	,			noitit
NAME			62 N				THE CONTRACT COMME
STREET ADDRESS				REET ADDRESS			
City-S1-ZiP	fu that the information even	Led with this filed does not a		TY-ST-ZIP j	d in Section 119.07(3)(i), Florida Statut	es. I further certif	v that the
information indic	ated on this annual report o	or sumplemental annual report	t is frue and a	accurate and tha	at my signature shall have the same leg ort as required by Chapter 607, Florida	ai enect as it ma	ide under oatn: inat
appears in Block	c 12 or Block 13 Lehanged	or the receiver or trustee em , or on an attachment with an	address.	viconto tina iehr	A section of the sect	ingende and the	any namo

561/691-9463