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

PROFIT CORPORATION ANNUAL REPORT

1997

E.G.C., INC.



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M81051

(8)

FILED Mar 04 1997 8:00am Secretary of State

- A HANDARA HÀR BERN BLAIN MÀIDH ÀIREA HINN ACHDH ANDAN AICH CHUIN GEAN DIÀIL BERN DEALL BORN

Principal Place 6041 KIMBERL SUITES J & K N LAUDERDAL 2. Principal P 21 Suite, Apt 22	Y BLVD E FL 23068 lace of Business	2a. Mailing 26	RLY BLVD I K DALE FL 33068-28	16		3. Date Incorporated or Qualified 05/16/1988 4. FEI Number 65-0052991 5. Certificate of Status Desired	3a. Date of Las 03/06/199	
City & State	6	City & 5	State			Election Campaign Financing Trust Fund Contribution	\$5.0	00 May Be
Zip	Country	Zip		Country	,	8. This corporation has liability for	intangible tax unde	
24	25	29	30	<u>) </u>			Yes No	
DAD	9. Name and Address of Current Registered Agent RADER, STUART A. 81 Name					10. Name and Address of New Registered Agent		
730° SUN	I W. PALMETTO PARK ROAD TE 200 C CA RATON FL 33433			82 83	Street Addr	ess (P.O. Box Number is Not Accepta	ole)	
				84	City		FL "	ip Code
agent La SIGNATURE	in familiar with, and accept the oblig	ent and title if applicable	607.0505, Floric	la Statute: legistered Age	S.	oration submits this statement for the ion's board of directors. I hereby acce	DATE	
12.		D DIRECTORS	L per exe	13.		ADDITIONS/CHANGES TO OFFIC		
NAME STREET ADDRESS CITY-ST-ZP	D Waknine, Eli 6041 Kimberly Blyd #J&K N Lauderdale Fl		L DELETE	1.1 THTLE 1.2 NAME 1.3 STREET 1.4 CITY-S			Chang	
NAME STREET ADDRESS CITY+ST-ZIP			DELETE	2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-1			Chang	ge Addition
THILE NAME STREET AODRESS			DELETÉ	3 1 TITLE 3.2 NAME 3 3 STREET	ADDRESS		Chang	ge Addition
CITY-SI-7/2 TILE NAME STREET ADDRESS			DELETE.	3.4. CHY-1 4.1 TITLE 4. 2 NAME 4.3 STREET			☐ Chang	ge Addition
CITY - ST - Z ET TITLE NAME STHEET ADDRESS			DELETE	4.4 CITY - S 5.1 TITLE 5.2 NAME 5.3 STREET			Chang	ge Addition

14. If 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 in dicated 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 trusfee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Brock 12 or Block 13 if change 0, or so an attachment with an address.

5 4 CITY - ST - ZIP

6.3 STREET ADDRESS 6.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

SIGNATURE:

CITY-ST-ZP

STREET ADDRESS

CITY -51 - 7/P

TITLE

NAME

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

71-8197

Dartime Phone #

Change

Addition