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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # M96901

(7)

FILED

Apr 21 1997 8:00am

Secretary of State

| | ECT BOOKS INC. | | | | | | | | |
|---|--|---|--------------|--------------|--|---|---------------------------|---|-----------------------------|
| Principal Place of Business Mailing Address 2912 CALLE DERECHA SANTA FE NM 87505 US Mailing Address 2912 CALLE DERECHA SANTA FE NM 87505-6530 US | | 0 | | | - CONTROL TO THE TO BUILD BUIL | | | | |
| | | | | | | 3. Date Incorporated or Qualified 09/01/1988 | 1 | te of Last F 6/1996 | Report |
| 2. Principal Place of Business 2a. Mailing Address | | | | | 4. FEI Number | | | oplied For | |
| 21 26 26 | | | | | 65-0098980 | | | ot Applicable | |
| Suite, Apt. #, etc. | | | | | 5. Certificate of Status Desired | | | Additional | |
| 22 City & Stat | 27 City & State City & State | | | | | & Floation Commeics Cines II | | | equired |
| 23 | 28 | | | | | 6. Election Campaign Financing Trust Fund Contribution | | | May Be to Fees |
| Zip | Country | Zip | Cou | intry | | 8. This corporation has liability for i | _= | | |
| 24 | 25 | 29 | 30 | | | | Yes [| | . 100.002, |
| | 9, Name and Address of Curre | ent Registered Agent | | | | 10. Name and Address of New Re | gistered A | gent | |
| | IN, LYLE | | | 81 | Name | | | | |
| 10805 QUEEN ANNE LANE | | | 82 | Street Addre | ess (P.O. Box Number is Not Acceptab | lo) | | | |
| MAF | PLES FL 33942 | | | 83 | | | | • | |
| | | | | 03 | | | | | |
| | | | | 84 | City | | FL | 85 Zip | Code |
| 11. Pursuant office or r | to the provisions of Sections 607.05 registered agent, or both, in the Stat- | 02 and 607.1508, Florida Statu e of Florida. Such change was | tos, the a | bove d by | e-named corporation | oration submits this statement for the pon's board of directors. I hereby accep | urpose of a t the appo | hanging it intment as | ls registered registered |
| | im lamiliar with, and accept the oblig | gations of, Section 607.0505, Fi | orida Sta | tutes | i. | | | | |
| SIGNATURE | Signature, typed or printed name of registered ac | gent and title if applicable (NO1 | E flugistere | d Agei | nt signature require | o when reinstating) | DATE. | | |
| 12. | | ND DIRECTORS | 13. | | | ADDITIONS/CHANGES TO OFFIC | ERS AND | DIRECTOR | IS IN 12 |
| TITLE | PD | ☐ DELETE | 1,1 Tr | TLE | | | | Change | Addition |
| name | MICHAELSON, SANDRA A. | | 1.2 N | AME | | | | | |
| STREET ADDRESS | 2912 CALLE DERECHA | | 1.3 \$ | IREET | ADDRESS | | | | İ |
| CITY-ST-ZIP TITLE | SANTA FE NM | DELETE | | TY-S1 | T-ZIP | | | | |
| NAME | STD Michaelson, Peter A. | □ DETER | 2.1 11 | | | | l | Change | Addition |
| STREET ADDRESS | 2912 CALLE DERECHA | | 2.2 N | | | | | | |
| CITY-ST-ZIP | SANTA FE NM | | | | ADDRESS | " 2 | | | |
| TITLE | ONITY I E THE | DELETE | 311 | IIY-S | 11-2119 | | | Change | Addition |
| NAME | | — | 3 2 N/ | | | | | | E Addition |
| STREET ADDRESS | | | 1 | | ADDRESS | | | |] |
| CITY-ST-ZIP | | | | 11Y-S | | | | | ĺ |
| TITLE | | ☐ DELETE | 4.1 TI | | | | | Change | ☐ Addition |
| NAME | | | 4.2 N | AME | | | | | |
| STREET ADDRESS | | | 4.3 ST | REE1 / | ADDRESS | | | | |
| CITY-ST-ZIP | | | 4.4 CI | IY-SI | I - ZIP | | | | |
| TITLE | | □ DELETE | 5.1 TI | 116 | | | 1 | Change | Addition |
| NAME | | | 5.2 N/ | | | | | | |
| STREET ADDRESS | | | | | ADDRESS | | | | |
| CITY-ST-ZIP | | Delete | | IY-SI | - 7IP | | | - | |
| TITLE | | DELETE | 6111 | | | | Ļ | Change | L Addition |
| NAME OTDEET ADDRESS | | | 6.2 NA | | | | | | |
| STREET ADDRESS | | | | | ADDRESS | | | | |
| 14. I do hereb | ov certify that the information supplie | ed with this filing does not quali- | | IY-SI | | in Section 110 07/3Vi). Florida Statuton | Lfurther | a a wilfe i sha a i | 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 concertion 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 18 if hanged, or on appetrachment with an address.