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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

	JAL REPOR 1997	ता 🔑			etary of S OF CORP	State	Secret	ary of S	State
DOCU 1. Corporatio	MENT #	P2130	9	(0)					
PHILIP 2	Z. LEVINSO	N P.C.							
Principal Plac				Mailing Address		, , , , , , , , , , , , , , , , , , , 	A TREFFEDI FIN INDOFFIIERD INUL OFFICE	MANUT BIRIT BURA BIRIT BIRIT	BYDU HDDI
1300 N. FEDERAL HWY SUITE 107		8	300 N. FEDERAL HWI JUITE 107						
BOCA RATON	FL 33432		В	IOCA RATON FL 3343	12-2848		3. Date Incorporated or Qualified	3a. Date of Last R	eport
· · · · · · · · · · · · · · · · · · ·							10/17/1988	02/01/1996	<u> </u>
2. Principal P	lace of Busines	SS .	2a 26	Mailing Address			4, FEI Number 36-3169863	 	plied For of Applicable
Suite, Apt.	#, etc.			Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75	Additional
City & Stat	'e		27	City & State				Fee Re	
23			28	<u> </u>		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	6. Election Campaign Financing Trust Fund Contribution	\$5.00 Added	
Zip		Country		Zip 1	_	Country	8. This corporation has liability for		. 199.032,
24	g. Name ar	d Address of Curr	29 rent Regi	stered Agent	30		Florida Statutes 10. Name and Address of New Re		
LEV	INSON, PHILI					81 Name			
112	30 HIGHLAND	CIRCLE DRIVE				82 Street Ac	ddress (P.O. Box Number is Not Acceptal	ole)	
BO(ca raton fl	_ 33428				83			
						84 City		FL T	Code
11. Pursuant office or agent 1 a						e above-named or rized by the corpo Statutes	corporation submits this statement for the paration's board of directors. I hereby acce	FL T	
	Signature, typed or	ns of Sections 607.0 at, or both, in the Stat, and accept the ob- printed name of registrate OFFICERS A	agent and till	le if applicable ((NOTE: Begi	84 City		PL purpose of changing it the appointment as	s registered registered
SIGNATURE.	Signature, type-d or	printed name of registeries OFFICERS A	agent and till	kcif applicable ((NOTE: Bog	84 City e above-named or rized by the corpo Statutes	equired when reinstaking)	PL purpose of changing it the appointment as	s registered registered
SIGNATURE. 12. TITLE NAME	Signature, typed or PST LEVINSON,	Printed name of registered OFFICERS A	agent and of	le if applicable ((NOTE: Bog :	e above-named or rized by the corpo Statutes stered Agent signature relations.	equired when reinstaking)	DATE CERS AND DIRECTOR	s registered registered
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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 of 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 13 if changed, or on an attachment with an address.

PHILIP Z. LEVINSON

FILED

Jan 17 1997 8:00am