## 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 # P38775

(3)

17700 BROADWAY, INC.

Principal	Place	of B	usiness
-----------	-------	------	---------

Mailing Address

-1<del>7700 Broadway ave.</del> Bedford oh 44146 -- 17700 BROADWAY AVE.--BEDFORD OH 44146-2070

## FILED Feb 07 1997 8:00am Secretary of State



BEDFORD OH 44146		BEDFORD OH 44146-2070							
<del></del>					3. Date Incorporated or Qualified 05/11/1992		<b>3a.</b> Date of Last Report <b>03/06/1996</b>		
· ·	lace of Business	2a. Mailing Address			4. FEI Number		A	pplied For	
	ROADWAY AVE.	26 10 BKOPH	)W/1	Y AVE	34-0972935			lot Applicable	
Suite, Apt 22	-	Suite, Apt. #, etc.			5. Certificate of Status Desired			Additional lequired	
City & State 23 BFDF	ORD, Ohio	City & State  28 BEDFORD		onio	6. Election Campaign Financing Trust Fund Contribution			May Be to Fees	
	Country 25 U 3 19	29 44146	-₹our 30	try セシガ	This corporation has liability for in     Florida Statutes		tax under s	s. 199.032,	
	9. Name and Address of Current				10. Name and Address of New Reg	istered /	Agent		
PES	ISES, MARVIN		[1	Name					
	0 VIÁ ROSA		h	32 Street Addre	ess (P.O. Box Number is Not Acceptable	le)			
BOO	CA RATON FL 33433		L		(				
			Į,	93					
			-  -	34 City			<b>85</b> Zip	Code	
						_FL			
office or r	registered agent, or both, in the Stale c im familiar with, and accept the obligat	it Florida. Such changa was ar	uthor zoo	by the corporati	oration submits this statement for the pl on's board of directors. I hereby accep	t the app	changing i pintment as	its registered s registered	
SIGNATUHE	Signature: Typed or posted name of rogistared agent	and the if applicable (NOTE:	Hogistered	Agent signature require	ed when reinslating)	DATE	<del></del>		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTO	RS IN 12	
TITLE	DCP	DELETE	1.1 TITE	E			Change Change	Addition	
NAM!	MEISEL, STANLEY A.		1.2 NAN	Æ Í					
STREET ADDRESS	17700 BROADWAY AVE.		1.3 STR	EET ADDRESS					
CITY ST ZIF	BEDFORD OH		<b>—</b>	r-ST-ZIP	····	,			
TOTLE	DVC	L_] DELETE	21 111				Change	Addition	
NAME STOSSET ADDRESS	MEISEL, MICHAEL 17700 BROADWAY AVE.		2.2 NAN						
STREET ADORESS	BEDFORD OH			EET ADDRESS					
CITY-ST-ZIP TITLE	DS	☐ DELETE	2. 4 GIT	Y-\$T-ZIP			Change	Addition	
NAME	PESSES, PAUL D.	Octobe	3.2 NAM		:" 	e#	Last Change	TTT MONITON	
STREET ADDRESS	17700 BRAODWAY AVE.			EFT ADDRESS					
CITY-ST-2IP	BEDFORD OH		1	Y-\$1-ZIP	•				
TITLE	VP	DELETE	4.1 TITU				Change	Addition	
NAME	MEISEL, MICHAEL	_	4.2 NA						
STREET ADURESS	17700 BROADWAY AVE.		1	EET ADDRESS					
CITY-ST-7IP	BEDFORD OH			-ST-ZIP					
TI*LE	T	☐ DELETE	5.1 TITL				Change	Addition	
N4Mí	MEISEL, STANLEY A.		5.2 NAN	1E			-		
STREET ADDRESS	17700 BROADWAY AVE.	·	5.3 STR	EET ADDRESS					
City - ST - ZiP	BEDFORD OH		5.4 CITY	'-ST-ZIP					
TITLE		DELETE	6.1 TIT)				Change	Addition	
NAME			6.2 NAM	tE			-		
STREET ADDRESS			6.3 STR	EET ADDRESS				!	
C-14 - ST- ZIP			6.4 CH1	'-ST-ZIP					
44	and the state of t		<del></del>						

14. I 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 indicated on this annual report or supplemental annual report is true and acceptate 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 true empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 I changed, or on an attachment with an address.

**SIGNATURE:** 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-31-97 216-233-230