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

Mailing Address 7480 FAIRWAY DR.

**PROFIT** CORPORATION annual report

1997



ELORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **P92000014127 (4)**

HORIZONS III. INC.

Principal Place of Business

7480 FAIRWAY DR.

SUITE 106 Suite 106 MIAMI LAKES FL 33014-6890 MIAMI LAKES FL 33014 3. Date Incorporated or Qualified 3a. Date of Last Report 12/21/1992 03/12/1996 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 65-0376096 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 23 28 Added to Fees Country Country 260 Zip 8. This corporation has liability for intangible tax under s. 199.032, Yes X No Florida Statutes 30 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name MCNULTY, JOAN 7480 FAIRWAY DR. Street Address (P.O. Box Number is Not Acceptable) SUITE 106 MIAMI LAKES FL 33014 83 84 City 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Sign of a self-gas it in productinance of region rup agent and site if applicable (NOT). Flugistered Agent signature required when reinstaling) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) 12. OFFICERS AND DIRECTORS 13. Change Addition DELETE THEE 1.1 TITLE MCNULTY, JOAN CR2E034 1.2 NAME NAV: 7480 FAIRWAY DR., SUITE 106 13 STREET ADDRESS STREET ADDRESS MIAMI LAKES FL 33014 14 CHY-ST-ZIP O1Y-\$1-7# DELETE 21 TITLE Change \_\_\_ Addition Hhie MCNULTY, WILLIAM J JR. 22 NAME NAMI 7480 FAIRWAY DR., SUITE 106 STREET ADDRESS 2.3 STREET ADDRESS MIAMI LAKES FL 33014 01Y-\$1-ZP 2. 4 CITY - ST - ZIP DELETE 3.1 TITLE Change Addition THEF MCNULTY, BARBARA L 3.2 NAME MANAG 7480 FAIRWAY DR., SUITE 106 3.3 STREET ADDRESS STREET LADORESS MIAMI LAKES FL 33014 3 4. CITY-ST-ZIP CHY-51 2P DELETE Change CollibbA 4.1 TITLE TITLE 4. 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 City-St-ZiP DELETE Change Addition 5.1 TITLE THE NAV: 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS 54 CITY - ST - ZIP CHY-S1-701 DELETE Change Addition 6 1 TITLE  $III_*F$ 62 NAME NAME 6.3 STREET ADDRESS STREET AUDRESS

6.4 CITY - ST - ZIP

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 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 eath; 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

305-822-1414

FILED

Mar 07 1997 8:00am

Secretary of State

SIGNATURE: 1

appears in Block 12 or Block 13 if chang

City St 7a

Joan McNulty