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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARAMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P9300001583 (2)

RANDOLPH HOUSE, INC.

FILED
Mar 14 1997 8:00am
Secretary of State

Principal Place of Business		Mading Address		<b>)</b>				
3243 N.E. 12TH STREET POMPANO FL 33064		3243 N.E. 12TH STREET POMPANO FL 33062-8112						
					3. Date incorporated or Qualified 01/04/1993	e of Last Report 2/1996		
2. Principal P	lace of Business	2a. Maling Address			4, FEI Number		Aj	pplied For
21		26			11-2188172			ot Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired			Additional lequired	
22 City & Ctat		City & State			A Floring Council of Floring			
City & State		<u> </u>		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zip	Country	[28]   Zip	Country		8. This corporation has liability for it			
24 25		29	n ' h::1		Florida Statutes Yes No			
	g, Name and Address of Current I				10. Name and Address of New Re	gistered A	gent	
BIVL	ANO, ONOFRIO		81	Name				
	N.E. 22ND STREET		82	82 Street Address (P.O. Box Number is Not Acceptable)		ule)		
	ITHOUSE POINT FL 33064		0	Sitteet Addition (F.O. Dox Patillion in Not Accopted				
•.,			83					
			84	City			<b>85</b> Zip	Code
				,	poration submits this statement for the patient's board of directors. I hereby accept	FL		
SIGNATURE	Signature Typed or perfer rame of repoters a agent OFHCERS AND	DIRECTORS	13.	ni signature <b>r</b> equ	airco whice reinstating)  ADDITIONS/CHANGES TO OFFICE			
TITLE	D DISTANCE ON OFFICE	[_] orrese	1.1 101.6			Ĺ	Change	Additio
NAME	BIVIANO, ONOFRIO		1.2 NAME					
STREET ADDRESS	2830 N.E. 22ND AVE. LIGHTHOUSE POINT FL 33064		1.3 STREET					
CITY-ST-ZIP	LIGHTHOUSE POINT PL 33004	DHFH	14 C-TY - S	1-7IP		<u>_</u>	Change	Additio
TITLE		€1 ittrit	2.1 TITE! 2.2 NAME	İ		Ļ	Caladyo	C.J Addition
NAME			2.3 STREET	Athenetics				
STREET ADDRESS			2 4 CHY-5					
CITY - ST - ZIP TITLE		Прин	2.4 GHY-3 3.1 JOH	217 (L. L. J.)			Change	Additio
NAME		-	3.2 NAME					
STREET ADDRESS			3.3 STRF1.1	ADDRESS				
CITY-ST-ZIP			3.4 CHY-5	ST-7tP				-/-
TITLE		DELETE	411016	T			Change	Additio
NAME			4. 2 NAMI			-		
STREET ADDRESS			4.3 S168E1	ADORESS				
CITY-ST-ZIP			4.4 C(1) - S	1-20			<del></del>	
TITLE		[ ] DITELE	5.1 TITLE			l	Change	Addite
NAME			5.2 NAME					
STREET ADDRESS			5.3 \$18EFF					
CITY-ST-ZIP			5.4 CITY - S	4 - ZIP			Change	Additi
TITLE		Dipertie	6.1 1/1Lf			l	change	LJ AJOIUI
NAME			6.2 NAME	KOODI CO				
STREET ADDRESS			6.3 STREET					
CITY-ST-ZIP	<u> </u>		6.4 City - S	i - 782				

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 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 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

NONATURE OF Sing River

3/10/97