## 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 # P93000002921 (3)

## **FILED** Jan 27 1997 8:00am Secretary of State

Principal Place	MPORARY ENTERPRISES, IN o of Business DA MANGO ROAD EACH FL 33409	Mailing Address 1300 N. FLORIDA MANGO WEST PALM BEACH FL 33						
				3. Date Inco 01/13/	orporated or Qualified	3a. Date of Last 03/14/1996		]
2. Principal P	ace of Business	- 2a. Mailing Address				<del></del>	Applied For	1
21	183 Church 51	26 1883	Church S	> \ 65-03	79942		Not Applicable	]
Suite, Apt.	#, etc.	Suite, Apt #, etc.		5. Certificat	e of Status Desired	1 1 +	Additional Required	
City & State	00 FC	City & Stays	R-		Campaign Financing d Contribution		May Be	
Z内つい	Country	Z22400	Country	8. This corp	oration has liability for in	tangible tax under		1
24 557	25		30	Florida S		Yes No		1
n.	9. Name and Address of Current	บอลิเอเอเฉก หลือแก	81 Name	IV. MAINS AF	d Address of New Re	Iverbien Wägit		$\dashv$
1300 WES	5, ALAN 0 n. Florida Mango Road 5t Palm Beach Fl 33409		82 Street A 83 84 City	883 W WPB	umber is Not Accepted	FL  85   Z	35989	
11. Pursuant t	to the provisions of Sections 607.0502 egistered agent, or both, in the State of	and 607.1508, Florida Statute	s, the above-named o	corporation submits	this statement for the p	urpose of changing	its registered	1.
office or re agent Lar	egistered agent, or both, in the State o m familiar with, and accept the obliga	of Florida. Such change was a tions of, Section 607.0505, Flo	uthorized by the corp rida Statutes.	oration's board of d	rectors. I hereby accep	t the appointment a	is registered	1
SIGNATURE								
	Stocutive, typed or perfect range of registered agen		Registered Agent signature i			DATE		1_
12.	OFFICERS AND	DELETE DELETE	13.	ADDITION	S/CHANGES TO OFFIC	ERS AND DIRECTO		-[8
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STREET ADDRESS	W. PALM BEACH FL 33409	Ψ.	1.4 CITY-ST-ZIP	WPB	$\kappa$ 33	ऽ५०७		ling W
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14. 1 do hereb	by certify that the information supplied so indicated on this annual report or si	i with this lilling does not qualif Jondomontal applied report is tr	y for the exemption St	ateu in oeciion 119 that my signature s	.ບາ (ວ)(ເ), Fiorida ວິເສໄປໃຕ້: hall have the same lega	s. i futitier certily th Leffect as if made i	at the	\

Information modeled on this armost report or supplemental armost report is due and accurate and trial rity signature shall have the same legar effect as it made under of Lam an officer or director of the receipt 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 apart of the same appears in Block 12 or Block 13 if changed, or on an apart of the same appears in Block 12 or Block 13 if changed, or on an apart of the same appears in Block 12 or Block 13 if changed, or on an apart of the same appears in Block 12 or Block 13 if changed, or on an apart of the same appears in Block 12 or Block 13 if changed, or on an apart of the same appears in Block 12 or Block 13 if changed, or on an apart of the same appears in Block 12 or Block 13 if changed, or on an apart of the same appears in Block 12 or Block 13 if changed, or on an apart of the same appears in Block 12 or Block 13 if changed, or on an apart of the same appears in Block 12 or Block 13 if changed, or on an apart of the same appears in Block 12 or Block 13 if changed, or on an apart of the same appears in Block 12 or Block 13 if changed, or on an apart of the same appears in Block 12 or Block 13 if changed, or on an apart of the same appears in Block 12 or Block 13 if changed, or on an apart of the same appears in Block 12 or Block 13 if changed, or on an apart of the same appears in Block 12 or Block 13 if changed in Block 13 if chan

SIGNATURE:

SIGNING OFFICER OR DIRECTOR

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