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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STAT

Sandra B. Mortham

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May 09 1997 8:00am

Secretary of State

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Secretary of State
DIVISION OF CORPORATIONS

1997

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CAK	(0)	CONS	TRUC	HON	CORF	PORAT	ION

			~~						1 1212 1301
Principal Place of Business Mailing Address						(*** (***) ***) *** *** *** *** ***		#131# #11# # 111	IE 1011 Q Q F
800 NORTH LA	KE BLVD	600 NORTH BLVD							
NORTH PALM	RCH FL 39408		STE A NORTH PALM BCH FL 33408-5309						
US	501112 00000	US				3. Date Incorporated or Qualified 01/25/1993			
2. Principal P	lace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number			
21		26	[26]			65-0381290 Not Applicable			ot Applicable
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75	Additional
22		27				S. Certificate of Status Desired		Fee Re	equired
City & State	e	├-· - -	City & State			6. Election Campaign Financing	r		May Be
23		· ·	28		Trust Fund Contribution			to Fees	
Zip	Country	Zip	Count	IJΥ		8. This corporation has liability for	ntangible] Yes = [. 199.032,
24	25 9, Name and Address of Curre	29 29 Agent	30			Florida Statutes 10. Name and Address of New Re			·
DAH	IL, MICHAEL D	The state of the s	ε	ĭΤ	Name	TO. Hame and Address of Hor Hogistered Agent			
	NORTH LAKE BLVD			_].					
STE			82 Street Addres			ddress (P.O. Box Number is Not Acceptat	ile)		
	RTH PALM BCH FL 33408		83						
1,01	THE POST OF THE COLOR			_					
			16	4	City		FL	85 Zip	Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Stati	utes, the abo	L. sve	-named c	orporation submits this statement for the r		L L L	ls registered
office or r	egistered agent, or both, in the State	e of Florida. Such change was	authorized	by	the corpo	orporation submits this statement for the pration's board of directors. I hereby accept	of the app	iointment as	registered
	Thanna with, and accept the oblig	gations of, decitor doz.obos, i	IOHOR CIGIO	ica.					
SIGNATURE	Signature typed or printed name of registered as	gent and title diapplicable (NG	01E: Registered A	\gen	ri signalure re	quired when reinstating)	DATE		
12.	OFFICERS AF	ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTOR	RS IN 12
TITLE	DPS	DELETE	1.1 1111.1	F				☐ Change	Addition
NAME	DAHL, MICHAEL D	•	1.2 NAM	1E					
STREET ADDRESS	600 NORTH LAKE BLVD STE	A	1.3 STRI	1.3 STREET ADDRESS					
CITY-ST-ZIP	NORTH PALM BCH FL	<u></u>	1.4 CITY	- \$1	- ZIP			·····	···
TπL€	DVP .	DELETE	2.1 THE	ŧ	- 1			☐ Change	Addition
NAME	DAHL, ROBERT S		2.2 NAM	łE					
STREET ADDRESS	600 NORTH LAKE BLVD		23 STR	ET /	ADDRESS				
CITY-ST-ZIP	NORTH PALM BCH FL	Floren	2.4 CITY		1-7IP			T7 0	77 4400-
TITLE	DT Dahl, Carolj.	DELETE	31 1011		{			☐ Change	Addition
NAME OTRECT ARROSON	600 NORTH BLVD STE STE	4	3 2 NAM		100000				
STREET ADDRESS	NORTH PALM BCH FL	1			ADDRESS				
CITY-ST-ZIP TITLE	HAMILLAND DOLLE	DELETE	3.4. CITY 4.1 TO U		1 · ZIP			Change	CoilibbA
NAME		La beccit	4. 2 NAN		Í			U viimiy€	C.J ROUNION
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP			4.3 \$1 kg						l
TITLE		DELETE	5.1 1/TL		4.11			Change	Addition
NAME			5.2 NAM						
STREET ADORESS					ADDRESS				
CITY-ST-ZIP			5.4 QITY)				
TITLE		DELETE	61100				······································	Change	Addition
NAME			6.2 NAM	IE.					
STREET ADDRESS					ADDRESS				Ì
CITY-ST-ZIP			6.4 CITY						
14. I do heret			lify for the e	xen	nption sta	ted in Section 119.07(3)(i), Florida Statute			
l am an o	in indicated on this annual report or fficer or director of the corporation on In Block 12 or Block 13 if changed.	or the receiver or trustee empo	wered to ex	eçu	rate and thute this rep	hat my signature shall have the same lega port as required by Chapter 607, Florida S	ateles; a	s it made un ind that my t	ider oath; that name
	MIA	/ 1 / 1 / 2	1			$\cdot \wedge \wedge \cdot \cdot \cdot$			