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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 28 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P93000026555 (1)

STEVE MCKENNA, INC.

**SIGNATURE:** 

Principal Place of	Rusiness	Mailing Address	<del></del>						
112 KNOLL WAY JUPITER FL 33477		112 KNOLL WAY JUPITER FL 33477-9613	112 KNOLL WAY					:	
						3. Date Incorporated or Qualified 04/09/1993		te of Last Re 11/1996	port
2. Principal Place	of Business	28. Mailing Address	<b>├</b> ¬			4. FEI Number			plied For
Suite, Apt. #, e	de	Suite Apt # etc	Suite, Apt. #, etc.			65-0407353		\$8.75 A	t Applicable
22		<u> </u>	27			5. Certificate of Status Desired		Fee Re	
City & State		City & State	the state of the s			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution			
Zip	Country	Zip				8. This corporation has liability for intangible tax under s. 199.032.			
24	25 29 30		30		Florida Statutes Yes Y No  10. Name and Address of New Registered Agent				
	, Name and Address of Cur	rent Registered Agent		81	Name	10. Name and Address of New Hi	igistered /	/Gent	
MCKEN									
	IOLL WAY R FL 33477		82 Street Add			ress (P.O. Box Number is Not Accepta	ble		
JUPITE	n PL 334//			83					
				84	City			85 Zip C	Code
					•		FL		
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	facilities (speed or printed name of registered	agent and title if applicable (NC	DTE Flegistere	d Ager	il signature requir	red when reinstaling)	DATE		
12.		AND DIRECTORS	13. DELETE 1.1 T			ADDITIONS/CHANGES TO OFFI	CERS AND	☐ Change	S IN 12 Addition
			1.1 T	IILE IAME					E Addition
	ickenna, steve 12 knoll way				ADDRESS				
1	UPITER FL			3 STREET ADDRESS 4 City-St-Zip					
TITLE				2.1 TITLE				Change	Addition
NAME			2.2 N	AME					
STREET ADORESS			2.3 5	REET.	address				
CITY-ST-ZIF				ITY - S	T - ZIP				144000
THILE		☐ DELETE	3.1 T					Change	Addition
NAME				MÉ					
STREET ADDRESS			335	ŀ	ADDRESS				
TILLE		DELETE	3 4.1 4.1	IY-S LE	1-21			Change	Addition
NAME		<b></b>	4.2	ME					
STREET ADDRESS			4.3 \$	KEET	ADORESS				
CITY - S1 - ZIP			4.4 (	Y-8	T- <b>2</b> IP				
TITLE		DELETE	5.11	ı.E				☐ Change	Addition
NAME			5.2 (	ΛE					
STREET ADDRESS			5.3 \$		ADDRESS				
CITY - ST - ZIP		DELETE	5.41		T-ZIP			Change	Addition
11TLE		☐ DETE∮E	6.1	E ac	1			- Onengo	L. Addition
NAME GIOSSI ADSIDESS			6.21		ADDRESS				
STREET ADDRESS			6.44		T-ZIP				
14. I do hereby	certify that the information sup	plied with this filing does not qui	alify for the	хө	mption state	d in Section 119.07(3)(i), Florida Statu	tes. I furthe	r certify that	the
Information in Lam an office	ndicated on this annual report or director of the corporatio	or supplemental annual report is on or the receiver or trustee empore	s true and owered to	ec	irate and tha ute this repo	at my signature shall have the same leg ort as required by Chapter 607, Florida	Statutes; a	s if made un and that my r	name