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

PROFIT CORPORATION ANNUAL REPORT

1997



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

POCUMENT # P93000030017 (6)

FILED Apr 24 1997 8:00am Secretary of State

MRGR C	CHPURATION						
Principal Place of Business Mailing Address			-		T TORRESHED AND THE COURT OF TH	30400 \$1151 00111 00101 161	##
268 8 UNIVERS PLANTATION FI US		268 UNIVERSITY DR. PLANTATION FL 33324					
				3. Date Incorporated or Qualified	•		
2 Principal P	lace of Business	2a. Mailing Address			04/23/1993 4, FEI Number	<u> 04/25/1996</u>	
2. Principal Place of Business		26 268 8. University Dr		65-0411312	Applied For Not Applicable		
Suite, Apt. #, etc.		Suite, Apt. #, etc.				SR 75 Additional	
22		27	27		5. Certificate of Status Desired	,	Required
City & State		City & State		6. Election Campaign Financing			
23		28		Trust Fund Contribution	Trust Fund Contribution		
Zip	Country Zip		Country ⊡	,	8. This corporation has liability for in		s. 199.032,
24 25 29 3 9. Name and Address of Current Registered Agent			30		Florida Statutes Yayes \(\sum_{\text{No}} \) Yes \(\sum_{\text{No}} \) No 10. Name and Address of New Registered Agent		
					TO. Maine and Addiess of New Met	Jistorea Agent	
SNOWDEN, MICHAEL 1549 CORAL RIDGE DR.			-				
		82	82 Street Address (P.O. Box Number is Not Acceptable)				
0011	IAL SPRINGS FL 33071		83				
			84	City		OF 70	p Code
			01	City		FL 85 Zip	J C000
11. Pursuant office or re agent. I a	to the provisions of Sections 607.0 egistered agent, or both, in the Sta m familiar with, and accept the ob	502 and 607.1508, Florida Statute tte of Florida. Such change was at ligations of, Section 607.0505, Flor	s, the above uthorized by rida Statutes	e-named corp the corporates.	poration submits this statement for the p tion's board of directors. I hereby accep	urpose of changing It the appointment a	its registered as registered
SIGNATURE							
Signature, typed or printed name of registered agent and title if applicable (NOTE 12. OFFICERS AND DIRECTORS			Registered Age	int signature requi	signature required when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	DELETE	1.1 TITLE		ADDITIONS/ONANGES TO OFFICE	Change	 -
NAME	SNOWDEN, MICHAEL		1.2 NAME				
STREET ADDRESS	A A A A A A A A A A A A A A A A A A A		1.3 STREET	ADDRESS			
CITY-ST-ZIP	CORAL SPRINGS FL		1.4 CITY - S	ST- ZIP			
TITLE		☐ DELFTE	2.1 TITLE			Change	Addition
NAME	2.2		2.2 NAME				
STREET ADDRESS			2.3 STREET ADDRESS				
CITY-\$1-ZIP			2 4 City-5	ST-ZIP			-
TITLE			3.1 11TLE			Change	Addition
NAME			3.2 NAME				
STREET ADDRESS			3.3 STREET				
CITY-ST-ZIP TITLE			3.4. CITY - 9 4.1 TITLE	SI-ZIP		Change	Addition
NAME		C. Decere	4. 2 NAME			CT countries	C roomon
STREET ADDRESS			4.3 STREET	ATIDRESS			
CITY-ST-ZIP			4.4 City-S				
TITLE			5.1 TITLE			Change	Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET	ADDRESS			
CITY-ST-ZIP			5.4 CITY - S	I-21P			
TITLE	☐ DELETE 6.		6.1 TITLE			☐ Change	Addition
NAME			6.2 NAME				
STREET ADDRESS			6.3 STRFET	ADDRESS			
CITY-ST-ZIP	12.	C-1 31 11 12 12 12 12 12 12 12 12 12 12 12 12	64 CITY-S				
informatio	by certify that the information supplied in Indicated on this annual report of the correction	received with this tiling does not qualify it supplemental annual report is true	r for the exe	ription stated grate and that	d in Section 119.07(3)(i), Florida Statutes I my signature shall have the same legal	 i turiner certify the l effect as if made u 	at the under oath; that