## 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 # P93000045088 (0)

MONAF	ACH LAKE ESTATES, IN	VC.		1 18 011 00 110 1010 011 02 011 00 11	I ANIH NIBU NYAK ANINY INDINY ANI
Principal Place	ce of Business	\$4.8° \$44			
123 N.W. 131		Mailing Address 123 N.W. 13TH STREET			
SUITE 221 BOCA RATON		SUITE 221 BOCA RATON FL 33432-161	19		
-2				3. Date Incorporated or Qualified 06/18/1993	3a, Date of Last Report 04/30/1996
<u> </u>	Place of Business	2a. Mailing Address	7.00 110	4. FEI Number	Applied For
21 Suite And	# Alo	26 / NW 579E 1	JUBNER_	65-0456583	Not Applicable
Suite, Apt	. <b>#,</b> etc.	27 255 MAZ	love of be	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Sta	te	City & State	UNINO DIC	6. Election Campaign Financing	\$5.00 May Be
23		28 BOLA RAT	onFL	Trust Fund Contribution	Added to Fees
Zip	Country	72162	Country CA	8. This corporation has liability for i	
24	25 Name and Address of (		30 USH		Yes No
9, Name and Address of Current Registered Agent  DUBNER, ANNETTE  B1 Name				10. Name and Address of New Re	gistered Agent
7555 MANDARIN DR.					
BOCA RATON FL 33433			82 Street Addre	ess (P.O. Box Number is Not Acceptab	le)
			83		
	r		84 City		85 Zip Code
					FI   ' '
11. Pursuant office or ( agent. La	to the provisions of Sections 60 registered agent, or both, in the am familiar with, and accept the	)7.0502 and 607.1508, Florida Statutes ) State of Florida. Such change was au cobligations of, Soction 607.0505, Flori	s, the above-named corp orthorized by the corporational statutes.	oration submits this statement for the poon's board of directors. I hereby accept	urpose of changing its registered it the appointment as registered
SIGNATURE	Signature, typed or printed name of registe	ared agent and tale if anylogolds	Charles and American		
12.	<del></del>	RS AND DIRECTORS	Registered Agent signature require 13.	ADDITIONS/CHANGES TO OFFIC	FRS AND DIRECTORS IN 12
TILE	PD	☐ DELETE	1.1 TITLE	ADDITIONOJOHIANGEO TO OFFIC	Change Addition
NAME	DUBNER, ANNETTE		1.2 NAME		
STREET ADDRESS	7555 MANDARIN DR.		1.3 STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON FL		1.4 CITY - ST - ZIP		
TITLE		DELETE	2.1 TITLE		Change Addition
. NAME Street address			2.2 NAME		
CITY-ST-ZIP			2.3 STREE? ADDRESS 2.4 City-St-Zip		
TITLE		DELETE	3.1 TITLE		Change Addition
NAMÉ			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		1,
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	4.4 CITY-ST-ZIP		Change
NAME			5.1 TITLE 5.2 NAME		Change Addition
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		;

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), Fiorida 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 perporation 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 3 if ghanged, or on an attachment with an address.

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CITY-ST-ZIP

19/11/97 56

561-400 com

**FILED** 

Apr 21 1997 8:00am

Secretary of State