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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Apr 08 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000058610 (5)

MACDONALD ENTERPRISES OF BOCA, INC.

Principal Piace 2677 SOUTH 6 SUITE 9-B BOCA RATON	e of Business DCEAN BLVD.	Mailing Address 2677 SOUTH OCEAI SUITE 3-B BOCA RATON FL 3:			
				 Date Incorporated or Qualified 08/20/1993 	3a. Date of Last Report 03/19/1996
·	lace of Businoss	2a. Mailing Address	3	4. FEI Number	Applied For
Suite, Apt.	# alc	26		65-0431663	Not Applicable
22		27	u .	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
[원]		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for in	
24	9. Name and Address of Curren	29	<u> 30</u>]	Florida Statutes 10. Name and Address of New Reg	Yes No
267	CDONALD, PERCY 7 SO, OCEAN BLVD. CA RATON FL 33432		81 Name R 82 Street Add 83 84 GilDeex	ichard Shamel, Jr ress, (P.O. Brix Number is NoyAccoptable N: Federal Highu field Beach	
11. Pursuant office or ragent. I a	egistered agent, or both, in the State m familiar with, and accept thoublings	of Florida, Such change itions of, Section 607.050 it and title if applicable.	Statutes, the above-named corporate was authorized by the corporate ps. Florida Statutes. C. Richard S. (NOTE: Registered Agent signature requirements)	red whon reinstaking)	of the appointment as registered 1 1 9 7
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICE	
TITLE NAME	DPS Macdonald, P T	☐ DELE?	E 1.1 TITLE ;		Change Addition
STREET ADDRESS	2677 S. OCEAN BLVD., SUITE	3.B	1.3 STREET ADDRESS		
CITY-ST-ZIP	BOCA RATON FL	00	1.4 CITY - \$1 - ZIP		•
TITLE		Drif1			Change Addition
NAME			2.2 NAME		
STREET ADORESS			2 3 STREET ADDRESS		
CITY-ST-ZIP			2.4 CITY-ST-ZIP		
TITLE		L) DELLI			Change Addition
NAME Street address			3.2 NAME 3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		DELET			☐ Change ☐ Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		☐ DELE1			Change Addition
NAME			52 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		Delet	5.4 CITY-ST-ZIP		Chappe
TITLE		DEFEL			Change Addition
NAME PROPERTY			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		İ

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), Florida 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 corporation 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 13 if changed, or on an attachment with an address.