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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## 1997 DOCUMENT # P93000059148 (5)

INSTITUTE FOR HUMAN POTENTIAL, INC.

## **FILED** Mar 28 1997 8:00am Secretary of State



19501 NE 10 SUITE 305	nce of Business DTH AVENUE EACH FL 33179	Mailing Address 19501 NE 10TH AVENUE SUITE 305 N. MIAMI BEACH FL 33	9501 NE 10TH AVENUE						
						3. Date Incorporated or Qualified 08/19/1993			
2. Principal 21	Place of Business	2a. Mailing Address	2a. Mailing Address			AP A APAND			Applied For Not Applicable
Suite, Ap	ot #, etc.	Suite, Apt. #, etc.	4:			6. Certificate of Status Desired	\$8.75 Additional		
City & St	ate	City & State				Election Campaign Financing     Trust Fund Contribution		\$5.0	May Be
Z <sub>(j)</sub>	Country 25	Z <sub>I</sub> p	Cour	ntry	····	8. This corporation has liability for		tax under	
<del></del>	9. Name and Address of Cur		1371			10. Name and Address of New Re	gistered A	gent	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
S/	ALAND, DEBORAH			81	Name				
19501 NE 10TH AVENUE SUITE 305			-  -	82	Street Addr	ess (P.O. Box Number is Not Acceptat	ole)		<del></del>
	ORTH MIAMI BEACH FL 33179			63			<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>	<del></del>	<b>,,,</b> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
			Į.	84	City		FL	85 Zip	o Code
SIGNATURE	Signature, typed or printed name of registered					ed when reinstating)  ADDITIONS/CHANGES TO OFFICE	DATE CERS AND	DIRECTO	DRS IN 12
THEF	0	DELETE	1.1 7()	LE		,		Change	Addition
NAME	SALAND, DEBORAH		1.2 NA	ME					
STREET ADDRESS	2370 ARCH CREEK DR. N. MIAMI BEACH FL 33181	1			ADDRESS				
CITY - ST - ZIP TITLE	D D	DELFTE	1.4 CiT 2.1 TiT		T- ZIP			Change	Addition
NAMÉ	BEITSCHER, HARRIET	DECT	2.1 JIII		f			Onange	☐ Addition
STREET ADDRESS	OND ME TOOTH OTDEET A	103	1		ADDRESS				
CITY - \$1 - ZiP	N. MIAMI BEACH FL 33179		2. 4 CI	IY-S	ST-ZIP		27.4		
TITLE	D	<b>≥</b> DELETE	31 7)7	LE				Change	Addition
NAME	WEISS DEENA		32 NA						
STREET ADORESS	S 29480 NE SATH COURT	L	1		ADDRESS				
ONY+ST ZIP TULE	1 1 Min Mill Property Agency	DELETE	3.4. C)* 4.1 T(T		51-ZIP			Change	Addition
NAME			4. 2 NA					•	
STREET ADDRESS	8		4.3 STF	REET	ADDRESS				
CHY ST 702			4.4 CIT		T-ZIP	<u> </u>		r a	
TITLE		☐ DELETE	5.1 TIT					Change	e L. Addition
NAME Stage Laggerer	,		52 NA:		4DODECC				
STREET ADDRESS CHY-ST-Zie:	5		53 SII		ADDRESS				
TUTE TUTE		DELETE	61 TIT		11.5%			Change	Addition
NAMI			6.2 NA						
STREET ADDRESS	s • V		6.3 ST	REET	ADDRESS				
City Of 2in			C 4 017	ru r	T 710				

14. It 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.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Harnet Beitscher

0242603