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 # P93000070922 (8)

ILLEN, INC.

Mailing Address

FILED May 06 1997 8:00am Secretary of State



8670 E. ROGERS CIRCLE BOCA RATON FL 33487 US		3241 N.W. 63RD STREET BOCA RATON FL 33496-3310 US		3. Date Incorporated or Qualified	3a. Date of Last		
- B					10/05/1993	03/20/1996	
	ace of Business 1 N.W. 63rd ST.	2a. Mailing Address			4. FEI Number	 	Applied For
21 324 Suite, Apt. 1		Suite, Apt. #, etc.			65-0444698		lot Applicable
22	*, oto.	27			5. Certificate of Status Desired		Additional Required
City & State		City & State		6. Election Campaign Financing		May Be	
23 BOCA	RATON FI.	28			Trust Fund Contribution		to Fees
Zip 24 3349			Country 30		8. This corporation has liability for in Florida Statutes	tangible tax under Yes No	s. 199.032,
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered Agent			
	DOWITZ, MITCHELL L		81	Name <	STEVE GUTTER		
33 S.E. 8TH ST.				Street Add	ress (P.O. Box Number is Not Acceptabl	e)	
					ress (P.O. Box Number is Not Acceptable Lest Brown &	and P.H.	4
BOC	CA RATON FL 33432		83	•	•		
		\sim	84	City City		E1 85 Zig	Code
44 Pureuant t	to the provisions of Society FDV 0502	and 607 1508 Florida Statular	e the above	named com	AUTATION	repose of changing	its registered
office or re	egistered agent, or trefth, in the state of	I lorida Such change was au	uthorized by t	he corpora	poration submits this statement for the pution's board of directors. I hereby accep-	the appointment a	s registered
	m ramiliar with unto accept the dollida	1918 05 01 PROFESSION 607.0505, FIOR	noa Statutes.			4/2062	
SIGNATURE	Signalate, typed or printed hap c of printered agont	and title diapplicable (NOTE:	Registered Agent	signature requi	red when relustating)	DATE	
12.	OFFICERS AND	DIRECTORS	18.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTO	DRS IN 12
TITLE	P	☐ DELETE	1.1 DTUE			Change	Addition
NAME	CHIMOWICZ, ISAAC		1.2 NAME				
STREET ADDRESS	3241 N.W. 63RD STREET		1.3 STREET A	ODRESS			
CITY-ST-ZIP	BOCA RATON FL		1.4 CITY-ST-	ZIP			
TITLE	S	☐ DELETE	2.1 TITLE	-		L_ Change	L_ Addition
NAME .	L'ESPERANCE, LINDA		2.2 NAME				
STREET ADDRESS	3241 N.W. 63RD STREET		2.3 STREET A			1.1	
CITY-ST-ZIP	BOCA RATON FL	DELETE	2 4 CITY - ST	- ZIP		Change	Addition
TITLE		C) blue	3.1 717LE	1			L_J Addition
NAME			3.2 NAME	DEDEGO			
STREET ADDRESS			3.3 STREET A				
CITY-ST-ZIP TITLE		DELETE	3.4. CITY+ST 4.1 THLE	- ZIP		Change	Addition
NAME		Dec. 1	4.2 NAME	[Change Change	23.133.1011
STREET ADDRESS	·		4. 2 NAME 4.3 STREET A	nherss			
CITY-ST-ZIP			4.4 CHY-SI-				
TITLE		DELETE	5.1 TITLE	E-11		Change	Addition
NAME			5.2 NAME			v	
STREET ADDRESS			5.3 STREET A	DORESS			
CITY-ST-ZIP			5.4 CITY - ST-				
TITLE		DELETE	6.1 1111.6			Change	Addition
NAME			6.2 NAME	1			ļ
STREET ADDRESS			6.3 STREET A	DORESS			
CITY-ST-ZIP			64 CITY-ST				
	by certify that the information supplied	with this filing does not qualify			d in Section 119.07(3)(i), Florida Statutes	. I further certify the	at the

14. 1 do hereby certify that the information supplied with this filing does not quality for the exemption stated in Section 1907(3)(f), Florida Statutes Truther certify that the information indicated on this arimulal 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: CLUB STEWN FURTHER OF THE