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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Apr 28 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000074593 (3)

F & G ASSOCIATES, INC.

Principal Place of Business		Mailing Address			ODIII KOON OLUUI BINID KAIDO OKA HOEI
302 MOCCASIN TRL W JUPITER FL 33458 US		% JUPITER LAW CENTER 6390 INDIANTOWN RD S JUPITER FL 33458-7979			
				 Date Incorporated or Qualified 10/20/1993 	3a. Date of Last Report 04/23/1996
L	face of Business	2a. Mailing Address		4. FEI Number	Applied For
21	L _ L .	26		65-0464380	Not Applicable
Suite, Apt		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	e	City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	28	Country	Trust Fund Contribution	Added to Fees
24	25	29	30	B/This corporation has liability for in Florida Statutes	ntangible tax under s. 199.032, Yes \Begin{array}{c} No
LT.73	9. Name and Address of Curre		100	10. Name and Address of New Reg	
GUM	ASON, RICHARD P		B1 Name		
6200 INDIANTOWN PD				Address (P.O. Box Number is Not Acceptable	Δ)
CHASEWOOD PLZ STE 30			July Street	nddress (F.O. box fauthoer is faot Acceptabl	0 /
JUPITER FL 33458			83		
			84 City		FL 85 Zip Code
11. Pursuant t	to the provisions of Sections 607.05	02 and 607 1508. Florida Statu	ites, the above-named	corporation submits this statement for the po	
office or a	egistered agent, or both, in the State m familiar with, and accept the obliq	e of Florida. Such change was	authorized by the corr	poration's board of directors. I hereby accep	the appointment as registered
	is the inner with, and accept the oblig	garons of, Section 007.0303, 1	ionda Statules.		
SIGNATURE	Signarive types) or printed name of regulated as	gent and title if applicable (NC	TE Registered Agent signature	required when reinstating)	DATE
12.	OFFICERS AN	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS IN 12
TITLE	P	☐ DELETE	1.1 TITLE		Change Addition
NAME:	GULISANO, ANN		1.2 NAME		
STREET ADDRESS	302 MOCCASIN TRAIL W		1.3 STREET ADDRESS		
C11Y - S1 - 7IP	JUPITER FL	D. DECENT	1.4 CITY-ST-ZIP		
TILLE		☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
CHY-S1-ZIP TITLE		DELETE	2. 4 CITY-ST-ZIP 3.1 TITLE		Change Addition
NAM E		C occur	3.2 NAME		Coloride Colorida
STREET ADOPESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE	Commence of the commence of the property of the property of the commence of th	☐ DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		-
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-7IP			4.4 CITY - ST - ZIP		
TITE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY - S1 - ZIP			5.4 CITY - ST - ZIP		
Ditte		☐ DELETE	6.1 TITLE		Change Addition
NAME OFFICE LOSSINGO			6.2 NAME		
STHEET ADDRESS			6.3 STREET ADDRESS		
14. I do hereb	ov certify that the information sumplie	ed with this filing does not gue	6.4 City-ST-ZiP lify for the exemption s	taled in Section 119 07/3Vi). Florida Statutes	I further certify that the
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.					

3/3//97

(561) 746 - 4515