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 # P93000078853 (7)

1. Corporation Name C & S INVESTMENT GROUP, INC. Principal Place of Business 4705 N OCEAN B1 APT. 11-M SUITE 6080 BCA RATON FL 33431-5341										
FT LAUDERDAL US	.E. Fl. 33308	US BOCA RATON FL 334	31-5341			3. Date Incorporated or Qualif		Date of Last F	leport	
L			<u></u>			11/15/1993		6/21/1996		
2. Principal Place of Business 2a. Mailing Address						4, FEI Number		}	oplied For	
	N. Ocean Bl	26	Colle Amb III also			\$0.7E Adda			ot Applicable	
Suite, Apt. #	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional equired	
City & State	Ronch Fl &	City & State				Election Campaign Financia Trust Fund Contribution	ng 🗀		May Be to Fees	
Zip	Country	Zip	Cou	ntry		8. This corporation has liability	for intangi	ble tax under s	. 199.032,	
24 33	308 25 US.	29	30			Florida Statutes		□ No		
	9. Name and Address of Curre	nt Registered Agent				10. Name and Address of Ne	v Register	d Agent		
SILV	er, barbara b			81	Name					
	I N OCEAN DR			82	Street Add	dress (P.O. Box Number is Not Acc	eptable)			
	TE 608D									
	CA RATON FL 33431			63						
				84	City		E	L 85 Zip	Code	
SIGNATURE .	to the provisions of Sections 607.050 opistured agent or both, in the State of familiar with, and accept the obligations, type of capital name of registered agent led name of registered agent led name of registered agent	سسالار	15	H	KO HKA	Uired when reinstating)	# DAT	20-4	/	
12.	OFFICERS AN	ID DIRECTORS	13.			ADDITIONS/CHANGES TO (OFFICERS A			
TITLE	P	DELETE	1.1 TI	TLE				[] Change	Addition	
NAME	silver, barbara b		1.2 N	AME	ļ					
STREET ADDRESS	4101 N OCEAN DR, STE 608	D	1.3 S	TREET	ADDRESS					
CITY - \$1 - ZIP	BOCA RATON FL			ITY-5	Y-ZIP					
TITLE	VP	☐ DELETE	21 T	TLE	1			Change	Addition	
NAME	SILVER, JACK		2.2 N	AME	- 1					
STREET ADDRESS	4101 N OCEAN DR, SUITE 6	08D	2.3 \$	TREET	ADDRESS					
CITY - S1 - ZIP	BOCA RATON FL				ST-ZIP			11.50	1 1 2 2 2 2 2	
TITLE		☐ DELETE] Change	Addition	
NAME			3.2 N]					
STREET ADDRESS			3,3 \$	TREET	ADDRESS					
CITY-ST-ZIP					ST-2IP		, ,	T 1 X.	F 1 6 1 100	
TITLE		☐ DELETE			- 1			[] Change	Addition	
NAME			4.21	NAME	-					
STREET ADDRESS			4.3 S	TREFT	T 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), 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 advises.

4.4 CITY-ST-ZIP

5.3 STREET ADDRESS

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

5.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

SIGNATURE:

CITY-SY-ZIP

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

THLE

NAME

TITLE

NAME STREET ADDRESS

DELETE

DELETE

Change

[] Change

Addition

Addition

FILED

Apr 24 1997 8:00am

Secretary of State