## 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 #	P93000079740	(5)

				(FLA), INC.		911	40 (0)											
Principal Place of Business 706 VIA GENOVA DEERFIELD BEACH FL 33442				Mailing Address 706 VIA GENOVA DEERFIELD BEACH FL 33442-8647						1 2001/1001 210 101/00 144H 001H 0	BILL BÖLLI BELIK LERK	<b>T</b>	III OFBII	INI INI				
												3. Date Incorporated or Qualified 11/18/1993 3a, Date of Last Report 03/25/1996						
9	2. Principal Place of Business					2a, Mailing Address						4	11/18/1993 FEI Number	W	/20/ IR		olied For	┨
21		artification business				26					"	65-0438640		f		Applicable	1	
	Suite Apt.	Suite Apt. #, etc.			-	Suite, Apt. #, etc.						5.	Certificate of Status Desire	ed 🗆		. <b>75</b> A	dditional	
	City & State					City & State						6.	Election Campaign Finance		\$!	5.00	May Be	1
23	7 <sub>IP</sub>		Cour	ilm	28	28				ountry			Trust Fund Contribution Added to Fees					1
24	γφ	Country 25				Zip Co. 29 30			Courty	ouripy			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No					
		g, Name	and Add	ress of Curre	nt Reg	istered	Agent					10.	Name and Address of N	ew Registered	Agent			1
ļ		HEN, MAX							B1	Name								1
ł		VIA GENO							82	Street	Addre	ss (P	O. Box Number is Not Acc	eptable)	·····	<del></del>		1
DEERFIELD BEACH FL 33442									83				·	···		<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>	····	$\left\{ \right.$
						84							85	Zip C	ode	1		
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11.	Pursuant office or re	egiste 🖍 💘		enono Ali ini	and	6U/ +	B, Florida Statu	tes, the	rized by	the cor	poratio	ratioi n's	n submits this statement for oard of directors. I hereby	accept the ap	or chang pointme	ging ris int as r	registered egistered	ļ
610	agent i a SNATURE	m lan ( 🦸 (	2718		Hinns			prida	Statutes	S.		t/s	À	3/	, /ş	7		1
SIL		Signature, typed		me of registered ag-				E: Regi	stered Age	nt signatur	e required	hen	reinstating)	DATE				]
12.				OFFICERS AN	D DIR	ECTORS			13.	······			ADDITIONS/CHANGES TO	OFFICERS AN			IN 12	18
TITE	ļ	PT							1.1 TITLE						Ci	ange	Addition	15
NA3		COHEN, MAX							1.2 NAME									18
}	EET ADDRESS Y-ST-ZiP	706 VIA GENOVA DEER CREEK FL							1.3 STREET ADDRESS [ 1.4 CITY-ST-ZIP									
TILL		VS	WLIVI L						2.1 TITLE						☐ Cr	ange	Addition	18
NAM		IGNIZIO, THOMAS V.							2.2 NAME							•	<del></del>	1
1	EET ADDRESS	112 N. B	2.3 STREET ADDRESS			ADDRESS												
CITY	r-st-zie {	FT. LAUI							4 CITY-	ST-ZIP								
IIIL	Ē	VP		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	☐ DELETE 3.			3.1 TITLE		100	20	7.S.		L C	ange	Addition		
NAM	ate	CONTENT CONTENT				3.2 NAME		] ' '	_									
STR	EET ADDRESS	706 VIA		١					3.3 STREET	ADDRESS								1
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Titt	ſ						DELETE	- 4	4 1 TITLE						C	unye	Addition	
NAN								- 6	1. 2 NAME	ADDDESO								ļ
ļ	EET ADORESS									ADDRESS								
7171	Y-ST-ZIP E						DELETE		4.4 CITY-S 5.1 TITLE	1-617	<del> </del>				☐ Ci	ange	Addition	$\mathbf{I}$
NAN	}							- 1	5.2 NAME							•		
l	EET AUDRESS									ADDRESS	1							
	Y- \$1 ZIP								5.4 CITY - S									-
TELL							DELETE	-	S.1 TITLE		1				☐ Cr	ange	Addition	1
NAS	Æ								5.2 NAME									
STR	STREET ADDRESS						6.3 STR											
										~ 7.0	1							1

SIGNATURE:

14. I do hereby certify that the information supplied with this filing does information indicated on this agruel report of supplemental annual I am an officer or director of the corporation or the receiver or truste appears in Block 12 or Brook 13 if changed or on an intachment with

not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the 1 port is true and accurate and that my signature shall have the same legal effect as if made under oath; that is employered to execute this report as required by Chapter 607, Florida Statutes; and that my name

**FILED** 

Apr 16 1997 8:00am

Secretary of State