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

appears in Block 12 or Block 13 if

SIGNATURE

FLORIDA DEPARTMENT OF STATE **CORPORATION** Sandra B. Mortham ANNUAL REPORT Secretary of States 1997 DIVISION OF GORPORATIONS P93006085673 97 AUG -8 PM 3: 15 DOCUMENT # & MS General Corp Principal Place of Business 1601 Belvedere Road Mailing Address 1601 Belvedere Road Suite 407 South Suite 407 South West Palm Beach, FL 33406 West Palm Beach, FL 33406 Date Incorporated or Qualified 12/15/1993 3a. Date of Last Report 03/14/96 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0455352 Not Applicable 21 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution Added to Fees Zip Country Zin Country 8. This corporation has liability for intangible tax under s. 199.032. 24 25 29 30 Florida Statutes Yes 🔀 No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name William A. Meyer 82 Street Address (P.O. Box Number is Not Acceptable) 1601 Belvedere Road Suite 407 South 83 West Palm Beach, FL 33406 **64** City 85 Zip Code 11. Pursuant to the provisions of Sections 607.05.02 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature: typed or printed name of rege timed agent and title if applicable (NOTE Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE), □ DELETE 1.1 TOLE Change NAME William Mever 1.2 NAME STREET ADDRESS 1601 Belvedere Road Suite 407 South 1.3 STREET ADDRESS West Palm Beach, FL 33406 CITY - ST-ZIP 1.4 CITY - \$1 - ZIP 2.1 TITLE TITLE STD 600002265206----08/12/97--01097---003 NAME 2.2 NAME Gail Asarch STREET ADDRESS 2 3 STREET ADDRESS 1601 Belvedere Road Suite 407 South ****165.00 ****165.80 West-Palm Beach, FL 33406 2. 4 CITY - ST - ZIP CITY-ST-ZIP TITLE 3 1 TITLE Change Addition NAME 3 2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 34. CITY-ST-7IP DELETE 4.1 TITLE Addition TITLE Revocation of Diss. Files 4 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY - \$1 - 7IP CITY-ST-ZIP DECETE TITLE 5.1 DILE Addition 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY - ST-ZIP 5 4 C:TY - ST - 7(P TITLE DITE 61 THLE Addition NAME 6.2 NAME 6.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 14. I do hereby certify that the information pes not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the Ital annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that iver or trystee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name information indicated on this annual I am an officer or director of the conappleme

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561-689-6601