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

POCUMENT # P9400001179 (8)

PENDULUM SYSTEMS COMPANY, INC.

Principal 4 6 1	Place of	Business
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Mailing Address

2a. Mailing Address

2100 \$ OCEAN BLVD #509S PALM BEACH FL 33480

2. Principal Place of Business

2100 S OCEAN BLVD #503S PALM BEACH FL 33480-5210

FILED Mar 19 1997 8:00am Secretary of State

3a. Date of Last Report

Applied For

03/14/1996

3. Date Incorporated or Qualified

01/06/1994

4. FEI Number

21		26			65-0467292			ot Applicable	
Suite,	Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	П	\$8.75	Additional
22				Continuore or Status Desifeo		Fee Re	equired		
City &	State	her in the second of the secon			6. Election Campaign Financing			May Be	
23 Zip	Country	[28]		intry		Trust Fund Contribution	<u> </u>	Added	
24	25	29	30	личу		8. This corporation has liability for Florida Statutes		tax under s ∃No	. 199.032,
E-7;	9. Name and Address of Curre			Γ-		10. Name and Address of New Ro	_		
	· ·			81	Name				
	• •			82	Chront Addr	ess (P.O. Box Number is Not Accepta	.1.3		
	:			02	Street Addre	ess (P.O. Box Number is Not Accepta	Jie)		
				83	*				·····
				84	City			1561 7:2 ·	Code
				"	City		FL	85 Zip i	2006
11. Pursu	ant to the provisions of Sections 607.050 or registered agent, or both, in the State	2 and 607.1508, Florida	Statutes, the al	hove-	named corpo	pration submits this statement for the	ourpose of	changing it	s registered
agent	. I am familiar with, and accept the oblig	ations of, Section 607.0	606, Florida Stat	u by lutes.	the corporati	on's poare of directors, I hereby acce	prine app	omament as	regisierea
SIGNATU	RE								
12.	Signature, typed or pricied name of registerest ag		(NOTE: Registere	d Agen	l signature require	d when reinstaing)	DATE	5,565,55	
TITLE	OHICERS AN	D DIRECTORS DEL	-17	1. [ADDITIONS/CHANGES TO OFFIC	JERS AND	☐ Change	S IN 12
NAME	GOTTLIEB, MICHAEL	<i>DEC</i>	12 N/					L_1 Change	
STREET ADDR	ALE MARKINGS INC.				JODRESS				
CHY-ST-ZIP	UPPER NYACK NY			17-SI					
TITLE		☐ DÉLI			- 71			Change	Addition
NAME		_	2.2 N/		Ì			C.S. Villenge	
STREET ADDR	rss		2.3 SI	IREET A	DDRESS				
CITY-ST-ZIP			2.40	o1Y-S1	- ZIP				
TITLE		DELI	CONTRACTOR OF AN INC.					Change	Addition
NAME			3.2 NA	AME					
STREET ADDR	ess		3.3 ST	REET A	DDRESS				
CITY-ST-ZIP				11 Y - S1	- ZIP				
TITLE		☐ DECI	ETE 4.1 10	TEE				Change	Addition
NAME			4. 2 N	AME					
STREET ADDR	SS				DORESS				
CITY-ST-ZIP		DELI		1Y- S1-	- ZIP			<u> </u>	T A LESS
TITLE		_ Deti						Change	Addition
NAME STREET ADDRI	200		5.2 N/		ount co				
CITY-ST-ZIP	.55				DORES\$				
TITLE		DELE		17 · 51 - 11 F	. ZP.			Change	Addition
NAME			62 NA						L. J. Adolibii
STREET ADDRE	ss				DDRESS				
CITY-ST-ZIP				1Y-\$1-					
14. do h	ereby certify that the information supplie	d with this filing does no	it qualify for the	exen	wtion stated	in Section 119.07(3)(i), Florida Statute	s. I further	certify that	the
inform I am a	ation indicated on this annual report or s n officer or director of the corporation or irs in Block 12 or Block 13 inchange had	supplementa: annual rep -the receiver or trustee :	ort is true and a empowered to c	nocur	ate and that r	my signature shall have the same lega	al effect as Statutes, ar	if made und not that my n	der (ath; that lame
-	دادان الالتحالات	10// 11/2/1/	9			ひんどんつ	411	20P)	211