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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Feb 05 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P9400003062 (4)

C. R. ENTERPRISES OF SOUTH FLORIDA, INC.

Principal Place of Business Mailing Address									
2070 NW 86 TI CORAL SPRIN			2070 NW 86 TERR CORAL SPRINGS FL 33071-6169						
						3. Date Incorporated or Qualified 01/05/1994		le of Last   <b>5/1996</b>	Report
2. Principal P	Place of Business	2a. Mailing Address				4. FEI Number	· <del>*</del>	A	Applied For
		26				<b>65-0459566</b> Not Applicable			
Suite, Apt. #, etc.						5. Certificate of Status Desired		<b>-</b>	Additional
22			,						Required
23		28			Election Campaign Financing     Trust Fund Contribution			May Be	
Zip	Country	7 <sub>1</sub> p	Country	y		This corporation has liability for it			
24	25	29 3	0				Yes [		D. 100.002,
	g, Name and Address of Curre					10. Name and Address of New Rej	jistered /	gent	
	HARER, PHILIP A		81		Name				
	0 NW 86 TERR		62		Street Addre	ess (P.O. Box Number is Not Acceptab	le)	···	
COF	RAL SPRINGS FL 33071			L				<del></del>	
			83						
			84		City		FL	85 Zip	Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statutes	, the abov	e-r	named corp	oration submits this statement for the p	urpose of	changing	its registered
office or i	registered agent, or both, in the Stati ani familiar with land accept the oblic	e of Floridal Such change was aut gations of Section 607,0505, Flori	thorized b da Statute	yt s.	he corporation	oration submits this statement for the p on's board of directors. I hereby accep	t the appo	ointment a	s registered
SIGNATURE		,							
	Signature, typed or printed name of registered ag			ent	signature require	d when reinstating)	DATE		
12.	OFFICERS AN	ND DIRECTORS  DELETE	13.		<del></del>	ADDITIONS/CHANGES TO OFFIC	ERS AND	Change	
TITLE	SCHARER, PHILIP A		1.2 NAME		}			Uricingo	Addition
STREET ADDRESS	2070 NW 86 TERR		1.3 STREE	TAT	nnbeec				
CHY-ST-ZIP	CORAL SPRINGS FL 33071		1.4 CITY-1						
Title	STD	DELETE	2.1 TITLE	· ·				Change	Addition
NAME	SCHARER, CLAUDIA B		2.2 NAME						
STREET ADDRESS	2070 NW 86 TERR		2 3 STREE	T AZ	DORESS	•			
CiTY - ST - ZIP	CORAL SPRINGS FL 33071		2. 4 CITY-	SI.	- ZIP				
TITLE		☐ DELETE	3.1 TITLE					Change	Addition
NAME			3.2 NAME		]				
STREET ADDRESS			3.3 STREE	T AL	ODRESS				
C:TY - ST - ZIP		T or over	3.4. CITY -	ST-	-ZIP				
TITLE		☐ DELETE	4.1 TITLE					Change	Addition
NAME			4. 2 NAME						
STREET ADDRESS	1		4.3 STREE						
CITY - ST - ZIP TITLE	<del>†</del>	DELETE	4.4 CITY -: 5.1 TITLE	51-	ZIP			Change	Addition
NAME			52 NAME						The state of the s
STREET ADDRESS			53 STREE		DORESS.	•			
CITY ST-ZP			54 CITY-		1				
THILF		DELETE	6 1 TITLE					Change	Addition
NAME			62 NAME		-				
STREET ADDRESS			63 STREE	T A[	DDRESS				
1	1				ı				

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.