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

Mailing Address 6640 SW 129TH TER

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

SIGNATURE:

5730 SW 74 STREET



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Feb 12 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400003362 (8)

SUTTLE & ASSOCIATES, INC.

MIAMI FL 33156-7081 SUITE 200 SOUTH MIAMI FL 33143 3. Date Incorporated or Qualified 3a. Date of Last Report 01/13/1994 06/13/1996 4. FEI Number 2a. Mailing Address 2. Principa: Place of Business Applied For 65-0459422 Not Applicable 26 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 27 22 City & State City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 23 28 Zip Country Ζıp Country 6. This corporation has liability for intangible tax under s. 199.032, Yes 🔀 No 24 25 29 30 Florida Statutes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name SUTTLE, STEPHEN D 6640 SW 129TH TER Street Address (P.O. Box Number is Not Acceptable) **MIAMI FL 33156** 83 **B4** City Zip Code 11. Pursuant to the provisions of Sections 607.0502 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. I am farminar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typical or printed name of registered agent and trib. Papplicable (NOTE: Rogistered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS (96/6)12. 13. DELETE Change Addition 1.1 TITLE TITLE SUTTLE, STEPHEN D 1.2 NAME NAME 6640 SW 129TH TER 1.3 STREET ADDRESS STREET ADDRESS **MIAMI FL 33156** 1.4 CITY - ST-ZIP CHY-ST-ZIP Addition ☐ DELETE 2.1 TITLE Change TITLE 2.2 NAME NAME 2 3 STREET ADDRESS STREET ADDRESS 2 4 CITY-ST-ZIP CEY-SL-ZE DELETE Change Addition 31 TITLE 107.0 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 34, CITY-ST-ZIP CITY-S1-ZIP DELETE ☐ Change Addition 4.1 TITLE 1016 NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY - ST - ZIP Change Addition ☐ DELETE TITE 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP CitY - S1 - ZIP Addition TiltE DELETE 6.1 TITLE Change 6.2 NAME NAMÉ **6.3 STREET ADDRESS** STREET ADDRESS 6.4 CITY-ST-ZIP City - \$1 - 7IF 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.