SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Jul 21 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9400009340 (8)

EFFLER		NT EQUITY, II	NC.	· (0)										
Principal Plac	e of Business	· · · · · · · · · · · · · · · · · · ·	Mailing Add	ress				-	1 (10 11 11 1				# 3 (4) 10) 1 1 1 1	
10778 DALMA	NY WAY		10778 DALM	IANY WAY				İ						
SUITE A SUITE 331						P.O.								
ROYAL PALM	BEACH FL 33411	ROYAL PALM BCH FL 33411 US					DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified 3a. Date of Last Report							
00		00				3.	01/28/1994							
2. Principal P	lace of Business		2a. Mailing A	2a. Mailing Address				4.	- U1/28/1 FEI Numbi	994			04/30/,199	6 Applied For
21			_ ~	26				"	_65-048					Not Applicable
Suite, Apt.	#, etc.			Suite, Apt. #, etc.				1				V		Additional
22		27	27				ь.	Certificate	of Status	s Desired			Required	
City & Stat	е	City & St	City & State				6.	Election C	ampaign	Financing		\$5.0	0 Мау Ве	
23	· · · · · · · · · · · · · · · · · · ·	28						Trust Fund					d to Fees	
Zip	Country			Zip		Country		8. This corporation owes or has pa						
24	25 Name and	Address of Curr	29 ent Registered Age	29 30				_	Personal Property Tax due June 30. Yes 10. Name and Address of New Registered Agent					∐ No
DOI		Address of Can	on Hogistered Age	· · · · · · · · · · · · · · · · · · ·		81 1	lame • :					- -	eo Agent	
PORRO, HILDA M 13857 WELLINGTON TRACE											FFUR			
		JIN TRACE					treet Addr しょうつつ	ress (P	O. Box Nu	mber is ۱ ۲ لمم ۱	Not Accept	able)		
SUITE D-1 WEST PALM BEACH FL 33414						83	, - , ,	<u> </u>	VII	175- (• 1		
THEOL FALM DENOTIFE 30414										<u>.</u>				
							ity (ريخة	(o.L	PALA	1 8	EACH	F	L 85 3	Code 3 4 //
11. Pursuant	to the provisions	of Sections 607.0:	502 and 607.1508, F	lorida Statute:	s, the ab	ove-na	med corp	oration	n submits th	his staten	nent for the	purpose	e of changing	its registered
agenj 1-a	m lamiljar wiji ja	or born, in the sta ind accept the obl	502 and 607.1508, F ite of Fjorida, Such o igution of Section	nange was at 507.0505, Flor	umorized ida Statu	i by the utes.	e corporat	ion's b	oard of dire	ectors. Li	nereby aco	ept the a	appointment a	is registered
SIGNATURE-	$\rightarrow T_{U}$	mm F	Cffler		•							つ-	-15-9	7
	Signature lyped or pri	//	agen and little if applicable	(NOTE:		Agent si	gnatore requir					DATE		
12.	PŠ	OF MCERS A	ND DIRECTORS	DELETE	13. 1.1 101				DOMONS	/CHANG	ES 10 OFF	ICERS A	ND DIRECTO	
NAME	EFFLER, RA	NDV D	L	J Dittell									∐ Change	Addition
STREET ADDRESS	10778 DALA				1.2 NAME 1.3 STREET ADDRESS									
CITY-ST-ZIP	ROYAL PALI			1.4 CITY - ST- ZIP										
TITLE	VP	W DENOTITE		DELETE	2.1 1/11		<u></u>						Change	Addition
NAME	EFFLER, HE	RBERT	_			2.2 NAME							onange	Lui Addition
STREET ADORESS	10778 DALM					2.3 STREET ADDRESS								
CITY-ST-ZIP	ROYAL PALI						2.4 CITY-ST-ZIP							
TITLE				DELETE	3.1 7171								☐ Change	Addition
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CITY-ST-ZIP					3.4. C(T	IY-ST-ZI	Р							
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CITY-ST-ZIP				T r.r. = 1		Y - ST - 7 16	<u>`</u>							
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TITLE			L	DELETE	6.1 1111								Change	Addition
NAME CYCEST ADDRESS					6.2 NAN									
STREET ADDRESS					6.3 SIR	EET ADD	RESS							

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 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 hanged, or on an attachment with an address.