## 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

## DOCUMENT # P9400009356 (4)

CALHOUN & COMPANY, INC.

| Principal | Place of | Business |
|-----------|----------|----------|

Mailing Address

2741 N.E. 57TH COURT

## **FILED** Mar 13 1997 8:00am Secretary of State



| FORT LAUDER                         | DALE FL 33308                                            |                                                                           | FORT LAUDE                                                       | RDALE FL 333                                          | 08-2723                                  |                             |                            |                                                         |                          |                |                         |                            |
|-------------------------------------|----------------------------------------------------------|---------------------------------------------------------------------------|------------------------------------------------------------------|-------------------------------------------------------|------------------------------------------|-----------------------------|----------------------------|---------------------------------------------------------|--------------------------|----------------|-------------------------|----------------------------|
|                                     |                                                          |                                                                           |                                                                  |                                                       |                                          |                             | 3.                         | Date Incorporated or Q 01/28/1994                       | ualified                 | 3a. Date 03/05 | of Last R               | eporl                      |
| ·                                   | lace of Businos                                          | 5                                                                         | 2a. Mailing A                                                    | Address                                               |                                          |                             | 4.                         | FEI Number                                              |                          |                | Aj                      | plied For                  |
| 21                                  |                                                          |                                                                           | 26                                                               |                                                       |                                          |                             |                            | 65-0481141                                              |                          |                | No                      | of Applicable              |
| 22 Suite, Apt.                      |                                                          |                                                                           | Suite, Ap                                                        | t. #, etc.                                            |                                          |                             | 5.                         | Certificate of Status Des                               | sired                    |                |                         | Additional<br>equired      |
| City & State                        | е                                                        |                                                                           | City & St                                                        | alo                                                   |                                          |                             | 6.                         | Election Campaign Fina<br>Trust Fund Contribution       | •                        |                | \$5.00<br>Added         |                            |
| Zip                                 |                                                          |                                                                           |                                                                  | Countr                                                | у                                        | 8.                          | This corporation has lia   | bility for int                                          | angible ta               |                |                         |                            |
| 24                                  | 26                                                       | ]                                                                         | 29                                                               | 3                                                     | Florida Statutes  Yes  No                |                             |                            |                                                         |                          |                |                         |                            |
|                                     |                                                          | d Address of Curre                                                        | nt Registered Age                                                | nt                                                    |                                          |                             | 10.                        | Name and Address of                                     | New Regi                 | stered Ag      | ent                     |                            |
|                                     | HOUN, PEGG                                               |                                                                           |                                                                  |                                                       | 81                                       | Name                        |                            | -                                                       |                          |                |                         | i                          |
| 2741 N.E. 57TH COURT                |                                                          |                                                                           | 82                                                               | 82 Street Address (P.O. Box Number is Not Acceptable) |                                          |                             |                            |                                                         |                          |                |                         |                            |
| FOR                                 | RT LAUDERDA                                              | LE FL 33308                                                               |                                                                  |                                                       | 40                                       | ļ                           |                            |                                                         |                          |                |                         |                            |
|                                     |                                                          |                                                                           |                                                                  |                                                       | 83                                       |                             |                            |                                                         |                          |                |                         |                            |
| , i                                 |                                                          |                                                                           |                                                                  |                                                       | 84                                       | City                        |                            |                                                         |                          | FL             | <b>85</b> Zip           | Codo                       |
| 11. Pursuant office or reagent. I a | to the provision<br>egistered agent<br>im familiar with, | s of Sections 607.050<br>I, or both, in the State<br>and accept the oblig | 02 and 607.1508, F<br>of Florida. Such c<br>ations of, Section ( | lorida Statutes<br>hange was au<br>607.0505, Flori    | s, the abov<br>thorized b<br>ida Statute | e-named<br>y the corp<br>s. | corporatio<br>poration's t | on submits this statement<br>board of directors. I here | for the pur<br>by accept |                | hanging li<br>ntment as | s registered<br>registered |
| SIGNATURE                           | Signature, typed or p                                    | ninted name of registered ag-                                             | ont and title if applicable                                      | (NO1E)                                                | Registered Ag                            | ent signature               | required wher              | n reinstating)                                          |                          | DATE           |                         |                            |
| 12.                                 |                                                          | OFFICERS AN                                                               | ID DIRECTORS                                                     |                                                       | 13.                                      |                             |                            | ADDITIONS/CHANGES T                                     | O OFFICE                 |                |                         | S IN 12                    |
| TITLE                               | D                                                        |                                                                           |                                                                  | DELETE                                                | 1.1 THLE                                 |                             |                            |                                                         |                          |                | Change                  | Addition                   |
| NAME                                | CALHOUN,                                                 | PEGGY J                                                                   |                                                                  |                                                       | 1.2 NAME                                 |                             |                            |                                                         |                          |                |                         |                            |
| STREET ADDRESS                      |                                                          | 7TH COURT                                                                 |                                                                  |                                                       | 1.3 STREE                                | T ADDRESS                   |                            |                                                         |                          |                |                         |                            |
| CITY-ST-ZIP                         | FORT LAUD                                                | DERDALE FL 33308                                                          |                                                                  | <b>-</b>                                              | 1.4 CHY-                                 | ST-ZIP                      |                            |                                                         |                          | , ·            |                         |                            |
| TITLE                               |                                                          |                                                                           | L                                                                | DELETE                                                | 21 TITLE                                 |                             |                            |                                                         |                          | L.             | Change                  | Addition                   |
| NAME                                |                                                          |                                                                           |                                                                  |                                                       | 22 NAME                                  |                             |                            |                                                         |                          |                |                         |                            |
| STREET ADDRESS                      |                                                          |                                                                           |                                                                  |                                                       | 23 STREE                                 | I ADDRESS                   |                            |                                                         |                          |                |                         | ł                          |
| CITY-ST-ZIP                         |                                                          |                                                                           |                                                                  | 1 DELETE                                              | 2 4 CITY-                                | \$1 - Z(P                   |                            |                                                         |                          | r              | Change                  | Addition                   |
| TITLE                               |                                                          |                                                                           | <u> </u>                                                         | ] DELETE                                              | 3 1 TITLE                                |                             |                            |                                                         |                          | L              | T cusube                | Addition                   |
| NAME                                |                                                          |                                                                           |                                                                  |                                                       | 3.2 NAME                                 |                             |                            |                                                         |                          |                |                         |                            |
| STREET ADDRESS                      |                                                          |                                                                           |                                                                  |                                                       |                                          | I ADDRESS                   |                            |                                                         |                          |                |                         | İ                          |
| CITY-ST-ZIP<br>TITLE                |                                                          |                                                                           |                                                                  | DELETE                                                | 3.4. C(TY-<br>4.1 T)TLE                  | 31-21r                      |                            | <del></del>                                             |                          | T              | Change                  | Addition                   |
| NAME                                |                                                          |                                                                           |                                                                  | -                                                     | 4 2 NAME                                 |                             |                            |                                                         |                          | _              | - •                     | _                          |
| STREET ADDRESS                      |                                                          |                                                                           |                                                                  |                                                       |                                          | 1 ADDRESS                   |                            |                                                         |                          |                |                         |                            |
| CITY-ST-ZIP                         |                                                          |                                                                           |                                                                  |                                                       | 4.4 CHY-                                 |                             |                            |                                                         |                          |                |                         | ļ                          |
| TITLE                               | - · · · · · · · · · · · · · · · · · · ·                  |                                                                           |                                                                  | DELETE                                                | 51 TITLE                                 |                             |                            |                                                         |                          |                | Change                  | Addition                   |
| NAME                                |                                                          |                                                                           |                                                                  |                                                       | 5.2 NAME                                 |                             |                            |                                                         |                          |                |                         |                            |
| STREET ADDRESS                      |                                                          |                                                                           |                                                                  |                                                       | 53 STREE                                 | ADDRESS                     |                            |                                                         |                          |                |                         | ļ                          |
| CITY-ST-ZIP                         |                                                          |                                                                           |                                                                  |                                                       | 5.4 CITY-                                | ST - ZIP                    | <u></u>                    |                                                         |                          |                |                         |                            |
| TITLE                               |                                                          |                                                                           |                                                                  | DELETE                                                | 61 TITLE                                 |                             |                            |                                                         |                          | Ľ              | Change                  | Addition                   |
| NAME                                |                                                          |                                                                           |                                                                  |                                                       | 62 NAME                                  |                             |                            |                                                         |                          |                |                         |                            |
| STREET ADDRESS                      |                                                          |                                                                           |                                                                  |                                                       | 6 3 STREE                                | ADDRESS                     |                            |                                                         |                          |                |                         |                            |
| CITY-ST-ZIP                         |                                                          |                                                                           |                                                                  |                                                       | 6.4 DiTY-5                               | ST-ZIP                      |                            |                                                         |                          |                |                         |                            |

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 Stardtes; and that my name appears in Block 12 or flock 3 if changed, aron an althorhment with an address.