## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

DOCUMENT :	# P9400014335 (	1)

1. Corporation PREF	PROPELLER INC.	1) 600+1000	,						
Principal Place	of Business	Mailing Address				1 IE \$   IO DI   IO   IO   II   II   II   II		(B) ) B   B   00	
2511 NW 10	6 LN	2511 NW 16 LN			j				
BAY 6	BAY 6 BAY 6								
POMPANO	BEACH FL 33064	POMPANO BEACH FL	33064		3.	Date Incorporated or Qualified	<b>3a.</b> D	ate of Last F	leport
						02/18/1994		05/01/1	995
2. Principa' Pla	ice of Business	2a. Mailing Address			4.	FE! Number	1		Applied For
21		26				65-0469835			Not Applicable
Suite, Apt. #	f, etc.	Suite, Apt. #, etc			5.	Certificate of Status Desired		• -	Additional Required
22 City & State		City & State			-   -	Election Campaign Financing			
23		28				Trust Fund Contribution	$\square$		May Be
Zip	Country	Zip	Country		8.	This corporation has liab lity	r intangible	tax under s	199.032,
24	25	29	30		1		s ∐No		
	9. Name and Address of Curre	ent Registered Agent	81	 Nasasa		Name and Address of New	Registere	d Agent	<u></u>
FOOLE	OTON MICHAEL		61	Name					
	STON, MICHAEL IW 16 LN		82	Street	Address (P.	O. Box Number is Not Accepta	ible)		
BAY 6	ITT TO LIT		83						
	ANO BEACH FL 33064							11-9	0.1
			84	City			F	L 85 Z	p Code
familiar with SIGNATURE.	o the provisions of Sections 607.050 ad agent, or both, in the State of Fio h, and accept the obligations of, Sec Symbol, bad or prize rank disgressed age	otion 607.0505, Florida Statutes.	by the corp		request when re	e statogs	DATE		
12.		ND DIRECTORS	13.		1	ADDITIONS/CHANGES TO OF	FICERS A	the second second	<del>-</del> <u></u>
TITLE NAME	PT Wedzik, William T.	DELETE	1 1 THILE					Change	Addition
STREET ADORESS	101 S. CORTEZ DR. CIRC	IF O.	1.2 NAME 1.3 STREE	ADDRESS.					
CHY-SI-ZIP	NARGATE FL		14 CITY - S						
TITLE	VP\$	☐ DELETE	2 1 THILE	i				Change	Addition
NAME	EGG <b>C</b> ESTON, MICHAEL		2 8 NAME						
STREET ADORESS	158 NE. 45TH AVE.		23 STREET	ADDRESS					
CITY-S1-7IP	DEERFIELD BEACH FL		24 CITY - S	I - ZIP					
THUE NAME		☐ DELETE	3 1 TITLE 32 NAME					☐ Change	Addition
STREET ADDRESS			33 STREET	ADERESS					
CITY - ST - ZIP			34 CITY S		'				
TITLE		□ DELETE	4 ' TI'LE					Change	☐ Addition
NAME			4.2 NAME						
STREET ADDRESS			4.3 STHEFT	ADDRESS					
CHTY-ST-ZIP			4 4 CITY - S	7/2	,				<u> </u>
III.F		☐ DELETE	5 ! TI'LF					☐ Change	Add tien
NAME CTELL LADDRICES			5.2 NAME	Africation					
CITY-ST-ZIP			53 STREFT 54 City-S						
ULE ULE	)	DELETE	6 1 11'11	. !!				☐ Change	Add tien
NAME			6.2 NAME						
STHEET ADDRESS			63 S18(E)	ADDRESS					
CHY-SI-ZIP		==	6.4 CITY - S						
certify that oath; that t	y certify that the information supplied the information indicated on this and Lam an officer or director of the corp Block 12 or Block 13 if chan⊛i, or	nual report or supplemental annua loration or the receiver or trustee	al report is tru empowered t	e and a	ocurate and	that my signature shall have th	e same leg	gal effect as i	f made under

SIGNATURE:

PINTED NAME OF SIGNING OFFICER OR DIRECTOR LANGE ESCHOOL A 4-12-96 (954) 968 -1177

CR2E034 (12/95)