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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P94000025587 (4)

BOLDER IDEAS, INC.

Principal Place of Business Mailing Address
2699 STIRLING ROAD 2699 STIRLING ROAD
SUITE B-301 SUITE B-301
FT. LAUDERDALE FL 33012 FT. LAUDERDALE FL 33312-6543

FILED Mar 04 1997 8:00am Secretary of State



					04/04/1994	(3/18/1996		
	ace of Business	2a. Mailing Address		4.	FEI Number		Ap	plied For	
	6 Dawson St.		Lauson S	/ . ∟	65-0500501		No	t Applicable	
Surie, Apt.	#, etc	Suite, Apt. #, et	D.	5.	Certificate of Status Desi	red 🔲	\$8.75 A		
City & State 3 //0//y	wood FL 330	City & State 70//41	rood F	<u>-</u> ک ا	Election Campaign Finan Trust Fund Contribution	cing		May Be to Fees	
^{Zp} ≥30	023 Country USA	3302	Country	A 8.	This corporation has liable Florida Statutes	lity for intangi	ble tax under s	. 199.032,	
<u>' L</u>	9. Name and Address of Curre			10	Name and Address of N	lew Register	ed Agent	,	
ENGLEHARD, BARBARA 2478 EAGLEWATCH COURT FT. LAUDERDALE FL 33327				81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83					
			84	City			85 Zip	Code	
SIGNATURE	to the provisions of Sections 607.05 egistered agent, or both, in the Stat in familiar with, and accept the oblig Standing typed or professional at registered at		was authorized by to 15, Florida Statutes. (NOTE Registered Agent			y accept the r		registered	
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO			RS IN 12	
TILE	P	DELE			11 1 0 11		Change	Addition	
NAME	ENGLEHARD, BRETT				I hard, Brett				
STREET ADDRESS	2750 OCEAN CLUB BLVD. #	205	1.2 NAME 1.3 STREET AC 1.4 City-St-	DDRESS 17890	NE 31 Ct.	# 333 33160			
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4. 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 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.

SIGNATURE

CAULL LUCION DANIEL HONZ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 2-25-97

934-983.8001