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

PROFIT CORPORATION · ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Morthame Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # P94000034943 (8)

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Discord Blace of Business Mailing Andress				[
Principal Flade of Edeliness									
	ONGRESS AVE.	1109 SOUTH CONG W PALM BEACH FL							
W PALM BEACH FL 33406		WITH DEROTTE	THEM DEROTTE SOUR		3. Date Incorporated or Qualified 3a. Date of Last Report				
					05/01/1994	04/04	1/1995)	
		2a, Mailing Address			4. FFI Number		Ap	plied For	
2. Principal Place of Business		26			APPLIED FOR 65-048479.3 Not Applicable				
Suite, Apt. #, etc.		Suite, Apt. #, etc			5. Certificate of Status Desired	_ \$	8.75 Fee Re	Additional equired	
2		City & State			6. Election Campaign Financing		\$5.00	May Be	
City & State		28			Trust Fund Contribution			to Fees	
7.0	Country	Z(p)	Co	ountry	8. This corporation has liability for	intangible tax u	nders 1	99.032,	
Zip Country 25 9. Name and Address of Currer		29	30		Florida Statutes Yes No 10. Name and Address of New Registered Agent				
		rrent Registered Agent							
1				81 Name					
				82 Street Addr	ess (P.O. Box Number is Not Accepta	ble)			
YEEND, J				BZ BITCET FIGUR					
	UTH CONGRESS AVE.			83					
W PALM	BEACH FL 33406						85 Zip	Code	
				84 City		FLI	·		
	10	2602 and 607 1609 Florida St	atutes the a	hove named corpor	ration submits this statement for the pirid of directors. I hereby accept the ap	irpose of chang	ing its re	gistered offic	
 Pursuant to or registero familiar wit 	o the provisions of Sections 607.0 ed agent, or both, in the State of f th. and accept the obligations of, S	Florida Such change was aut Section 637.0505, Florida Sta	horized by the tutes.	e corporation's boa	ration submits this statement for the pirch of directors. Thereby accept the ap	pointment as reg	gisterea a	agent. i am	
SIGNATURE _	Signature, typed or printed harne of registered	aunit and title if applicance	(NOTE Bugists	red Agent signature require	d when renstatings	ETAC			
12.	OFFICERS	S AND DIRECTORS	1;	3.	ADDITIONS/CHANGES TO OF		Change	Addition	
TiTLE	DP	☐ DELETE	٠.	1 TITLE		L	Change	☐ Add:tion	
NAME	RICE, HERBERT S JR		13	2 NAME					
STREET ADDRESS	1109 S. CONGRESS AVE		1.	3 STHEET ADDRESS					
C-TY-S1-ZIP	W PALM BEACH FL 3340	6		4 CHY-ST-ZIP			Change	Addition	
TITLE	TS	☐ DELF16	. 2	1 DILE		L	Sharige	☐ Modition	
NAME	YEEND, JOHN		?	2 NAME					
STREET ADDRESS	1109 SOUTH CONGRESS	S AVE	2	3 STREET ADDRESS					
CITY - ST - ZIP	WEST PALM BEACH FL 3	33406		4 CITY - ST - ZIP			Change	Addition	
TILE		☐ DELETE	3	1 Table		لــا	unanyo	L Addition	
NAME			3	2 NAME					
STREET ADDRESS			3	3 STREET ADDRESS	0000017		46.1		
CITY-ST-ZIP				4 CiTY - ST - Z-P			Change	Addition	
OTT DI EN		CO NELECT			DOLOUL DO O		Ultalius	I I AQQUUUII	

14. Job hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 cath; 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.

4.3 STREET AUDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST - 7IP

4.4 CITY - ST - Z-P

4 1 THUE

4.2 NAME

5 1 TITLE

5.2 NAME

6 1 TITLE

6.2 NAME

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-S1-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

THILE

NAME

DELETE

DELETE

DELETE

1/29/96 407-642-7170

***200.00

☐ Addition

☐ Change

☐ Change