## FILE NOW: FILING FEE AFTER MAY 1 IS \$55

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMEN

Sandra B. Moream

Secretary of S DIVISION OF CORPO

TIONS

## FILED May 14 1997 8:00am Secretary of State

DOCUMENT # P9400045678 (7)  1. Corporation Name Principal Place of Business Mailing Address 1445 NORTH CONGRESS AVENUE SUITE 8 DELRAY BEACH FL 33445 DELRAY BEACH FL 33445								
US		US			<ol> <li>Date Incorporated or Qualified</li> <li>06/14/1994</li> </ol>	3a. Date of 05/17/1		eport
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number	, 00, 11,		plied For
21	4 -1-	26			65-0563446			Applicable
Suite, Apt.	₩, ΘIC.	Suite, Apt. #, etc.			5. Certificate of Status Desired		<b>5.75</b> A Fee Re	dditional quired
City & State	6	City & State			6. Election Campaign Financing	\$	5.00	May Be
Zip	Country	<b>2</b> (p	Count	'у	Trust Fund Contribution  8. This corporation has liability for in	Jangible tax ι		
24	9. Name and Address of Current F		30]	·	Florida Statutes  10. Name and Address of New Reg	Yes No		
VAN	VALKENBURG, REX A		8	Name	(4)			
3915 DUNCAN DRIVE BOCA RATON FL 33434			8:	2 Street Ac	ddress (P.O. Box Number is Not Acceptable	0)		
			<u>-</u>	1				
			8	3				
			84	City		FL 85	Zip C	ode (
11. Pursuant I	to the provisions of Sections 607.0502 a egistered agent, or both, in the State of im familiar with, and accept the obligation	and 607.1508, Florida Statutes Florida, Such change was au ons of, Section 607.0505, Flor	s, the about thorized b	ve-named copy the corpo	orporation submits this statement for the puration's board of directors. I hereby accept	rpose of char the appointm	nging its	registered registered
SIGNATURE								
12.	Signature, typed or printed name of registered agent a OFFICERS AND I		Registered A	gent signature re	quired when reinstating)  ADDITIONS/CHANGES TO OFFICE	DATE BS AND DIR	FCTOR	S IN 12
TITLE	D	DELETE	1.1 10 LF		NODE MONOGO POR MALES TO SETTION		Change	Addition
NAME	1445 N CONGRESS AVE 13S		1 2 NAME	)				
STREET ADDRESS				E1 ADDRESS				
CITY-ST-ZIP TITLE	DELRAY BCH FL D	LRAY BUT FL 1.46		S1-7IP			Change	Addition
NAME	VAN VALKENBURG, KATHY J		2.2 NAME	: 1			ango	
STREET ADDRESS	1445 N CONGRESS AVE		2.3 STRE	ET ADDRESS				
CITY-ST-ZIP	DELRAY BCH FL		2 4 CITY	- ST - ZIP				·
TITLE		DELETE	3 1 TITLE	.		IJ	Change	Addition Addition
NAME STREET ADDRESS			3.2 NAME 3.3 STREE	E1 ADDRESS				
CITY-ST-ZIP			3.4. CITY	ſ				
TITLE		DELETE	4.1 TOTLE				Change	Addition
NAME			4 2 NAM	1				
STREET ADDRESS				T ADDRESS				
CITY-ST-ZIP TITLE		DELETE	4.4 CITY - 5.1 TITLE				Change	Addition
NAME			5.2 NAME	- 1			*	
STREET ADDRESS			5.3 STRE	T ADDRESS				
CITY-ST-ZIP		Planter	5.4 C/TY				N	
TITLE		☐ DELĒTE	6.1 TITLE	1		□ (	Change	Addition
NAME STREET ADDRESS			6.2 NAMI	E1 ADDRESS				
CITY-ST-ZIP			6.4 CITY	1				
	by certify that the information supplied v	vith this filing does not qualify			ited in Section 119.07(3)(i), Florida Statutes	. I further cert	ify that	the

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 Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE DEPLEASE REX VAN VALKENBURG 4/28/97 561-28-97