## 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 # P94000081985 (1)

Principal Place 1221 UNIVERSI SUITE 540 CORAL SPRINC	e of Business TY DRIVE	Mailing Address 1221 UNIVERSITY DRIVE SUITE 540 CORAL SPINGS FL 33071-66	20		
US		US	•	3. Date incorporated or Qualified 11/07/1994	3a. Date of Last Report 05/01/1996
21 1221	Loversity Dive		versity Drive	4. FEI Number 65-0536592	Applied For Not Applicable
Suite, Apt.		Suite, Apt #, etc.	. ,	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	1 Springs FC	City & State	sgs.FL	Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees_
Zip 3330	Country ) 25 USA	29 3307   3	o] USA	This corporation has liability for in Florida Statules	ntangible tax under s. 199.032, Yes  No
	9. Name and Address of Current I	Registered Agent		10. Name and Address of New Re	gistered Agent
	HARD F. STOLAR		81 Name		
1221 UNIVERSITY DRIVE CORAL SPRINGS FL 33071			82 Street Addr	ess (P.O. Box Number is Not Acceptab	le)
	PC OF MINOS I C 5507 I		83		
			84 City		85 Zip Code
					FL   T
11, Pursuant office or r agent. La	to the provisions of Sections 607.0502 a egistered agent, or both, in the State of m familiar with, and accept the obligation	and 607,1508, Florida Statutes Florida. Such change was aut ons of, Section 607,0505, Florid	, the above-named corp thorized by the corporat da Statutes.	oration submits this statement for the p ion's board of directors. I hereby accep	urpose of changing its registered t the appointment as registered
SIGNATURE					
12.	Signature, typed or printed name of registered agent a OFFICERS AND I		togistered Agent signature requir	ed when reinstalling) ADDITIONS/CHANGES TO OFFIC	FRS AND DIRECTORS IN 12
TITLE	P	DELETE	1.1 TITLE		Change Addition
NAME	RICHARD F. STOLAR		1.2 NAME		
STREET ADDRESS	1221 UNIVERSITY DRIVE		1.3 STREET ADDRESS		
CITY-ST-ZIP	CORAL SPRINGS FL	Deter	14 CITY-ST-ZIP		Ohanno Laddinan
TITLE NAME		L.] DELETE	21 TITLE		Change Addition
STREET ADDRESS			2.2 NAME 2.3 STREET ADDRESS		
CITY-ST-ZIP			2. 4 CITY - ST - ZIP		
TITLE		DELETE	31 TIILF		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DELETE	3.4. C(1Y - ST - 2IP 4.1 T(1)		Change Addition
NAME		LJ WEEF TE	4. 2 NAME		C., Ollango C., Addition
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		<u></u>
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	5.4 CITY+ST-ZIP		Change Addition
TITLE		L_F DELCTE	6.1 10 LE		LI Grange LI Addition 1

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 supprenental 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 trusted 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.

NONATURE OF DEPOY

STREET ADDRESS CITY-ST-ZIP

4/20/07

(054)796 LIM

**FILED** 

Apr 25 1997 8:00am

Secretary of State