## FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

**FILED** 

Apr 29 1997 8:00am

Secretary of State

Daytime Phone #

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P9400084801 (7)

Principal Place	E of Business	Mailing Address				
1506 N. RIVERSIDE DRIVE UNIT 1004 POMPANO BEACH FL 33062		PO BOX 3484 POMPANO BEACH FL 33072-3484 US				
					3. Date incorporated or Qualified 11/21/1994	3a. Date of Last Report 07/30/1996
h	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
		Suite, Apt #, etc.			65-0540061	Not Applicable  \$8.75 Additional
22		27	- ,		5. Certificate of Status Desired	Fee Required
City & Stat	e	City & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
<i>Z</i> <sub>1</sub> p	Country	Zip	Country	,	8. This corporation has liability for	
24	25 29 30		30	Florida Statutes Yes No		
Disc	Name and Address of Curre     Name and Address of Curre	nt Hegistered Agent	81	Name	10. Name and Address of New R	legistered Agent
	H, Patricia 5 n. Riverside drive Unit 10	04	82		ess (P.O. Box Number is Not Accepta	able)
	IPANO BEACH FL 33062	•		Street Addi-	ess (r.o. box Number is Not Accepta	lole)
			83			
			84	City		FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statute	s, the above	a-named corp	oration submits this statement for the	purpose of changing its registered
office or r agent. La	eg-stered agent, or both, in the Stati m farm⊪ar with, and accept the obliq	e of Florida. Such change was a gations of, Section 607,0505, Flo	uthorized by rida Statute:	the corporati s.	ion's board of directors. I hereby acce	ept the appointment as registered
SIGNATURE		not-			ed when reinstating)	DATE
12.	Styrearure, typed or printed name of registered at OFFICERS Aft	OBLIGATIONS (NOTE	13.	eni signature requir	ed when reinstating) ADDITIONS/CHANGES TO OFFI	
PRE	D	DELETE	1.1 TITLE		11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Change Addition
NAME	RUSH, PATRICIA	UT 4004	1.2 NAME			
STREET ADDRESS CITY - ST - ZIP	1505 N. RIVERSIDE DRIVE UN POMPANO BEACH FL 33062	WI 1004	1.3 STREET	- 1		
Title	D DELETE		2.1 TITLE			Change Addition
NAMÉ	MURRAY, RICHARD		2.2 NAME			
STREET ADDRESS	1505 N. RIVERSIDE DRIVE UN	NIT 1004	2.3 STREET	í		
0/TY+S1+7/P 1014	POMPANO BEACH FL 33062	DELETE	2 4 CITY-ST-ZIP 3.1 TITLE			Change Addition
NAME	Lund Dillett		3.2 NAME			
STHELT ATJORESS			3.3 STREET	ADDRESS		
City St ZiP	T notite		3.4. CITY - ST - ZIP			Change Addition
TITLE NAME	☐ DELETE		4.1 TITLE 4.2 NAME			C CHARGE C ADDITION
SPREET ADDRESS			4.3 STREET	ADDRESS		
City-St 7.9	TO THE PARTY OF TH		4.4 CITY - S			
TITLE		☐ DELETE	5.1 TITLE			Change Addition
NAME Street address			5.2 NAME 5.3 STREET	ADDRESS		
CITY - ST - ZIP		•	5.4 CITY - S			
TILLE	DELETE		6.1 TITLE			Change Addition
NAM:			62 NAME		,	
STREET ADDRESS			6.3 STREET		,	
14. I do herel	by certify that the information supplie	ad with this filing does not qualify	6.4 CITY - 8 for the exe	motion stated	I in Section 119.07(3)(i), Florida Statut	es. I further certify that the
informatio	in indicated on this annual report or	supplemental annual report is tri	ue and accu	rate and that	my signature shall have the same leg t as required by Chapter 607, Florida	al effect as if made under oath; that