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 # P9500001810 (7)

AMERICAN BUSINESS BROKERAGE, INC.

		_		 _
Principal	Place	of	Business	

FILED Apr 23 1997 8:00am Secretary of State

|--|--|

Principal Place 2425 FRUITVILL SARASOTA FL	E ROAD	Mailing Address 2425 FRUITVILLE ROAD SARASOTA FL 34237-6222			\$ 10011001 (10 1016) Ellik 85111 80111/0E(21 80111/05/01 11011 11011 11011 11011 11011				
					3. Date Incorporated or Qualified 01/09/1995	3a. Date of Last Report 03/22/1996			
2. Principal Place of Business		2a. Mailing Address			4. FEI Number			olied For	
21 Culto Ami	4 010	26	65-0544076			Not Applicable \$8.75 Additional			
22	Suite, Apt. #, etc. Suite, Apt. #, etc. 27			5. Certificate of Status Desired	rtificate of Status Desired				
City & State)	City & State			6. Election Campaign Financing	\$	5.00	Mav Be	
23		28			Trust Fund Contribution		Added to		
Zip 24	Country	Zip	Cour	itry	8. This corporation has liability for	intangible t∋x u Yes [√] No	ınder s.	199.032,	
<u> </u>	25 9. Name and Address of Curre		30		Fiorida Statutes 10. Name and Address of New Re				
AI AF	RIO, CHARLES A	······································		B1 Name					
	FRUITVILLE RD			82 Street A	ddress (P.O. Box Number is Not Acceptat				
	ASOTA FL 34237		[3 Sileer A	odress (F.O. Box Number is Not Acceptat	леу			
				B3					
			- -	B4 City		—. 85	Zip C	code	
44 5		loon troc		"		FL.	'		
Office or re	egistered agent, or both, in the State marker with a state of the oblig marker with, and accept the oblig	e of Florida. Such change was a	ulhorized	by the corpo	orporation submits this statement for the poration's board of directors. I hereby acceptation's	ourpose of char of the appointm	nging its nent as r	registered egistered	
SIGNATURE	Signature, typed or printed name of registered ag	ent and title if applicable (NOTE	Registered	Agent signature n	equired when reinstating)	DATE			
12.	OFFICERS AN	ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRE	ECTORS	S IN 12	
TITLE	P	DELETE	1.1 3(1)	E			Change	Addition	
NAME	ALARIO, CHARLES A		1.2 NAI	WE	,				
STREET ADDRESS	2425 FRUITVILLE ROAD			EET ADORESS	•				
CITY-ST-ZIP TITLE	SARASOTA FL 34237	DELETE	1.4 C(1 2.1 T(1)	Y-ST-ZIP		<u> </u>	Change	Addition	
NAME			2.1 IIII	1		L.,.) (manye	Addition	
STREET ADDRESS				EFT ADDRESS					
CITY-ST-ZIP				Y-S1-ZIP					
TITLE		DELETE	3.1 TIT(Change	Addition	
NAME			3.2 NA	NE .					
STREET ADDRESS			3.3 STF	EET ADDRESS					
CITY-ST-ZIP		····	3.4. CH	Y-ST-ZIP					
TITLE		☐ DELETE	4.1 TITU			∐ ¢	Change	Addition	
NAME			4. 2 NA						
STREET ADDRESS				EET ADORESS					
CITY-ST-ZIP TITLE	· · · · · · · · · · · · · · · · · · ·	DELETE	4.4 CIT	Y-ST-ZIP		<u> П</u> г	Change	Addition	
NAME			5.2 NAM		·	۷ استا	uyo		
STREET ADDRESS				EFT ADDRESS					
CITY-ST-ZIP				Y-ST-ZIP					
TITLE		DELETE	6.1 TITL				Change	Addition	
NAME		•1	62 NAM	AE					
STREET ADDRESS			6.3 STR	EFT ADDRESS					
CITY-ST-ZIP				/-SI-ZIP					
14. I do hereb information I am an of appears in	by certify that the information supplied in indicated on this annual report of ficer or director of the corporation of in Block 12 or Block 13 if charging of	nd with this filing does not qualify supplemental annual report is tri if the recorder of trustectempower or on an altachment with his add	of for the e ue and ac pred to ex ress	exemption sta ocurate and t recute this re	ated in Section 119.07(3)(i), Florida Statute that my signature shall have the same lega port as required by Chapter 607, Florida S	s. I further certi il effect as if ma statutes; and th	fy that ti ade und at my na	he ler oath; tha amo	