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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Apr 25 1997 8:00am

Secretary of State

E TORINO I ATO ENTRE MILLE DESIGNATION DE DESIGNATION DE CENTRE PRINCIPALITA PRINCIPAL DE LA CONTRA DELLA CON

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000014837 (5)

PACKYS, INC.

Principal Place	e of Business	Mailing Address									
11979 PALMET	TO PARK RD	11379 W PALMETTO PARK	11379 W PALMETTO PARK RD								
STE EF		STE E-F	STE E-F								
BOCA RATON FL 89428		BOCA RATON FL 33428-2659 US				A Date Incorporated as Our	itiaal L	A. Data	of Look F	On and	
							 Date Incorporated or Qua 02/15/1995 	ineo	04/23/1996		
	ace of Business	2a. Mailing Address					4. FEI Number				pplied For
Suite, Apt.	4 ato	26 Suite Ant # etc	Suite, Apt. #, etc.				65-0555347				ot Applicable
22 Suite, Apr.	#, BIC.	· ·			ľ	5. Certificate of Status Desire	ed [I		Additional equired	
City & State	9	City & State	City & State				6 Floating Compoles Finance	ing.			
23		} 	28				 Election Campaign Finance Trust Fund Contribution 	ing [<u> </u>		May Be to Fees
Zip				Country			8. This corporation has liabili				
24	25	29	30				Florida Statutes	Y		No	100,000,
	9. Name and Address of Curre	nl Registered Agent					10. Name and Address of No	ew Regis	tereti Ag	jent	
NEA	LLY, BARBARA	•	· B1 Name)					
	4 SOUTHKAMPTTON PL		82 Stree			Addres	ss (P.O. Box Number is Not Acc	eptable)			, <u>.</u>
BOO	CA RATON FL 33434		_								
			1	83							
			h	84	City					85 Zip	Code
									FL		
11. Pursuant to	to the provisions of Sections 607.05 egistered agent, or both, in the State	02 and 607.1508, Florida Statute e of Florida. Such change was a	as, the ab- authorized	ove l by	:-named the cor	d corpor	ation submits this statement fo has board of directors. I bereby	r the purp accept th	ose of cl	nanging i otment as	ts registered registered
agent. I a	m familiar with, and accept the oblig	gations of, Section 607.0505, Flo	rida Statu	ites	i.		To bound of one of the last of the last	and option	ю арроп	in toric do	· cgiotorea
SIGNATURE											
12.	Signature, typed or printed name of registered ag	ONE BOT THE IT APPLICABLE (NOTE	. Registered	Ager	nt signature	re required	when reinstating) ADDITIONS/CHANGES TO		DATE	UDECTOR	00 IN 10
TITLE	DP OF TOURS AT	DELETE	11 111	F		Т	ADDITIONS/CHANGES TO	OFFICER		Change	Addition
NAME	NEALY, MICHAEL	A		1.2 NAME					_	3	
STREET ADDRESS	2905 S.W. 22ND ST.		1.3 STREET ADDRESS		ADDRESS						
CITY-ST-ZIP	DELRAY BEACH FL			1.4 CITY-S1-ZIP							
TITLE	DVP DELETE			2.1 TITLE						Change	Addition
NAME	NEALY, BARBARA		2.2 NAN	ΜE							
STREET ADDRESS	9314 SOUTHAMPTON PL		2.3 S1REET		ADDRESS						
CITY-ST-ZIP	BOCA RATON FL		2.4 CITY - S1 - ZIP								
TITLE		DELETE	3 1 111	LE		Ţ				Change	Addition
NAME			3.2 NAM	ΛE							
STREET ADDRESS			3.3 STH	EE1	ADDRESS	1					
ÇITY-ST-ZIP		·	3.4. CIT		T - ZIP	ļ					
TITLE		☐ DELETE	4 1 11()	LF						Change	Addition
NAME			4.2 NA	ME							
STREET ADDRESS					address						
CITY-ST-ZIP	150	Descent	4.4 CIT		1 - ZIP	 				7 2000	- 1-1-1-1-1-1
TITLE		☐ DELETE	5.1 TML						L	Change	Addition
NAME			5.2 NAM								ļ
STREET ADDRESS					ADDRESS	1					
CITY-ST-ZIP		DELETE	5.4 CIT		I - ZIP					Change	Addition
TITLE		L) OECCIE	6.1 TITL 6.2 NAM						L	T Change	
NAME STREET ADDRESS					ADDDCCC						
					ADDRESS	1					
CITY ST-ZIP	by certify that the information supplie	ed with this filing does not qualify	6.4 Cm y for the c			stated in	Section 119.07(3)(i), Florida S	statutes. I	further o	ertify that	the
lada-caati-	al la alta alta al contebio a constal como cetor.	errore la manada la concreta de la desta de la della d			'	al albas as	تنتا والمناه وأرهما المعام موريهم والماري	- 11 -6			أنت لقالدين بلم
appears in	ri indicated on this armual report of ficer or director of the corporation on h Block 12 or Block 13 if changed, o	or on an attachment with an add	ress.	انانا	are tille i	iopon a	is required by Chapter 607, Fit	mua sidli	лев, апо	wat my f	iai NV