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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 08 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000031319 (3)

DEEP SOUTH MANAGEMENT CORPORATION

	Principal Place of \$700 BATTERSEA R MIAMI FL 33133		Mailing Address 3700 BATTERSEA ROAD MIAMI FL 33133-6702				
						Date Incorporated or Qualified 04/21/1995	3a. Date of Last Report 01/24/1996
	2. Principal Place	of Business	2a. Mailing Address 26		4. FET Number 65-0579804	Applied For Not Applicable	
. 1	Sulte, Apt. #, etc. Suite, Apt. # 27			#, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
	City & State	¬ '			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
	Zip 24	Country 25	Zip Country 30		ıntry	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes 💢 Yes 🗌 No	
	g, Name and Address of Current Registered Agent				10. Name and Address of New Re	gistered Agent	
	BRIGGS, HERBERT A III 3700 BATTERSEA ROAD MIAMI FL 33133				Briggs, Nancy K. Street Address (P.O. Box Number is Not Acceptable) 3700 Battersea Road		
	11. Pursuant to the	e provisions of Soctions 607	.0502 and 607.1508, Florid	la Statutes, the a	bove-named corr	iami poration submits this statement for the p tion's board of directors. I hereby access	FL 85 Zip Code 33133 purpose of changing its registered

4-28-97____ **SIGNATURE** Briggs Nancy_K. 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. Change TITLE 🔲 DELETE 1.4 TITLE Addition President BRIGGS, NANCY K NAME 1.₽ NAME Briggs, Nancy K. 3700 BATTERSEA ROAD STREET ADDRESS 1.8 STREET ADDRESS 3700 Battersea Road MIAMI FL 33133 CITY-ST-ZIP 1.4 CITY-ST-ZIP Miami, FL 33133 PDST Y DELETE TITLE 2.4 TITLE Change Addition BRIGGS, HERBERT A III 2.2 NAME Deceased 3700 BATTERSEA RD. STREET ADDRESS 2 8 STREET ADDRESS MIAMI FL CITY-ST-ZIP 2.4 CHY-S1-ZIP DELETE 3 TITLE Change Addition NAME 32 NAME STREET ADDRESS 3 \$ STREET ADDRESS CITY-ST-ZIP 3.4. CITY-ST-2IP DELETE TITLE 4.1 TITLE Change Addition NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE TITLE 5.1 TITLE Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE 6.1 TITLE Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

14. I do hereby certify that the Information supplied with this filling 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 eath; 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.

6.4 CITY-ST-ZIP

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CITY-ST-ZIP