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 # P95000031825 (9)

JOHN L	ONGWORTH, INC.	•	•			I JARIJARI ME IRIGI DIMI DOMA BAWI A	6111 68136 41	(FB) 12001 40210 1100	(1 1 1)H 2 10 (
Principal Plac	ce of Business	Mailing Address							
3170 N. FEDERAL HWY SUITE 100 P.O.BOX 3206 LIGHTHOUSE POINT FL 33084 POMPANO BEACH FL 33072-3206									
						3. Date Incorporated or Qualified 04/19/1995		Date of Last R 5/01/1996	eport
2. Principal P	Place of Business	2a, Mailing Address	3			4. FEI Number	1		oplied For
<u>g]</u>		26			65-0575995		No	Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 / Fee Re	Additional equired	
City & Stat	le	City & State				6. Election Campaign Financing		\$5.00	
Zip	Country	7(p)	Cou	nlrv		Trust Fund Contribution	<u> </u>	Added	
24)	25	29	30	ii iir y		 Anis corporation has tiability for Florida Statutes 	or intangit. Yes		. 199.032,
21	9. Name and Address of Cu					10. Name and Address of New I			
WH	ITE, JOHN L			81	Name				
	0 N. FEDERAL HWY SUITE 10 HTHOUSE POINT FL 33064			82 83	Stroot Add	ress (P.O. Box Number is Not Accept			
				84	City		F	85 Zip (Code
agent. I a	registered agent, or both, in the Sam familiar with, and accept the o					poration submits this statement for the tion's board of directors. Thereby acc	opi the a		registered
12.		AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFF	ICFRS A	ND DIRECTOR	IS IN 12
TITLE	P	☐ DETE	1116	TLf				Change	Addition
NAME	WHITE, JOHN L		1 2 NA						
STREET ADDRESS	841 NE 9TH AVE. POMPANO BCH FL 33060				ADDRESS				
CITY-ST-ZIP TITLE	PUMPANO DUTI FL 33000	DELE	14 Cr		3 - 71P			Change	Addition
NAME		L.J tiere	2.2 NA					C Change	L_1 Addition
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP					ST - 7IP				
TITLE		□ DÉLET						Change	Addition
NAME			3.2 NA	AME	1				
STREET ADDRESS	}		3 3 \$ i	REET	ADDRESS				
CITY-ST-ZIP			3 4. C	HY- S	ST - ZIF				
TITLE		DELLI	E 4.1 10	LE				Change	Addition
NAME			4 2 N	ΛMŁ					
STREET ADDRESS			4381	HELT	ADDRESS				
CITY-ST-ZIP			4 4 Ci		T - ZIP				
TITLE		☐ DELLT						Change	Addition
NAME			5 2 N/						
CTREET ANORECC	1		1363	1110	Amporce				

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 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 chapter 6 or provided by the provided by

61 TITLE

6.2 NAME

CICALATUDE.

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

White

DELETE

4/22/07 (954)941-0821

Change Addition

FILED

May 13 1997 8:00am

Secretary of State