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



Principal Place of Business	Mailing Address
5120 THYME DRIVE	5120 THYME DRIVE
PALM BEACH GARDENS FL 33418	PALM BEACH GARDENS FL 33418-3526

FILED Apr 21 1997 8:00am Secretary of State



CORPANNUA	ROFIT ORATION LL REPORT		Sandra I Secreta	RIMENT OF STATE B. Mortham ary of State CORPORATIONS	Apr 21 1 Secreta	.997 8:00 ary of Sta	var ite
Principal Place o 5120 THYME DRIN PALM BEACH GA	R INCORPORATED T Business VE	Ма 512	5713 (8) Illing Address O THYME DRIVE M BEACH GARDENS				
·					3. Date Incorporated or Qualified 07/19/1995	3a. Date of Last Report 03/06/1996	
2. Principal Plac	e of Business	├ ─┐	Mailing Address		4. FEI Number	Applied	
Suite, Apt. #,	etc.	26	Suite, Apt. #, etc.		65-0598547	Not App	
22		27			5. Certificate of Status Desired	Fee Required	
City & State		28	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Added to Fee	
Ζip	Country	⊢ ¬	Zıp	Country	8. This corporation has liability for		032
24	25 Name and Address of	29 Current Registe	ered Agent	30	Florida Statules 10. Name and Address of New Re	Yes No	
SIGNATURE	he provisions of Sections 6 stered agent, or both, in th amiliar with, and accept th nature, typed or printed name of regis				rporation submits this statement for the patient of the patient's board of directors. I hereby acceptions	ourpose of changing its regi pt the appointment as regist	istere tered
12.		RS AND DIRECT		11 : flogislered Agent signature req	ADDITIONS/CHANGES TO OFFIC		12
TITLE	PS	. <u></u>	DELETE	1.1 TITLE			Additio
	KERR, ROBERT P			1.2 NAME			
	5120 THYME DRIVE Palm Beach Gardens	EI 99419		1.3 STREET ADDRESS			
	T DEACH GARDEN) I L 00410	DELETE	1.4 CITY - S1 - 2(P 2.1 T(TLE		Change	Addilio
NAME	Kerr, marie e			2.2 NAME		_ · _	
	120 THYME DRIVE			2.3 STREET ADDRESS			
	PALM BEACH GARDENS	3 FL 33418	DELETE	2 4 CITY-S1-ZIP		□ Change □ /	Additi
TITLE NAME			pereje	31 TITLE 3.2 NAME		y Li change Li	MOUILI
STREET ADDRESS				3.3 STREET ADDRESS			
CITY-ST-ZIP				3.4. CHY-SI-ZIP			
TITLE			DELETE	4.1 TITLE		Change /	Additi
NAME				4. 2 NAME			
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TITLE			DELETE	5.13/11/6		Change /	Additio
NAME				5.2 NAME			
STREET ADDRESS				5 3 STREET ADDRESS			
CITY-ST-Z#P			DELETE	5 4 C/TY-S1-ZIP		Phanas	Addie-
TITLE .			L Detert	6.1 TITLE 6.2 NAME		Change /	Additio
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				6.4 CITY-ST-ZIP			
TY-ST-ZIP				6.4 CITY-ST-ZIP			_

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 oath; 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 or Block 12 or Block 13 or Block 12 or Block 14 or Block 15 or Block 15