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 # P95000056260 (9)

ABITA, INC.

2575	SΩ	OCEAN	RLVD	STE	208S
		OOLMI			-000

Principal Place of Business

Mailing Address

FILED Apr 18 1997 8:00am Secretary of State



Suite, Apt. #, etc Suite, Apt. #, etc. City & State Cit			ICH FL 33487	HIGHLAND BEACH FL 334							
20									eport		
Suit April #, etc. Suit Ap	2.	Priocipal Pl	ace of Business	2a, Mailing Address			· · · · · · ·	Ar	plied For		
Surp April 4, etc. Sum	21		26				65-0607030	No	ot Applicable		
28	22	S⊯te, Apt.	· · · · · · · · · · · · · · · · · · ·		#, etc.		5. Certificate of Status Desired	T			
Country Zip Country Zip Country St. This corporation has bability for intendpite tax under 6: 199 032, 28 30 Florida Statutes Yes Name and Address of Current Registered Agent 10, Name and Address of New Registered Agent 14 Name 16 Name and Address of New Registered Agent 17 Name and Address 17 N	23	City & State)				, , ,				
HEALY, CHARLOTTE A 104 NE 6TH AVENUE STE A DELRAY BEACH FL 33483 105 106 107 107 108 109 109 109 109 109 109 109	24	Zιρ		 1		у	' '				
11. Pursuant to the provisions of Sociens 607.0502 and 607.1508, Florida Statutes. 12. Pursuant to the provisions of Sociens 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. In a tensitive with, and accept the obligations of, Socien 607.0505, Plorida Statutes. SIGNATURE Socient space produces designed agent are respectable. (NOTE Registered Agent sprature required when reintating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Purpose of the purpose of changing its registered agent sprature required when reintating DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Purpose produce when reintating DATE 12. OFFICERS AND DIRECTORS 12. Purpose 12. Pu			g, Name and Address of Curr	rent Registered Agent			10. Name and Address of New Re	gistered Agent			
DELRY BEACH FL 33483 83		HEA	LY, CHARLOTTE A		81	Name					
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes. Per above named corporation submits this statement for the purpose of changing its registered agont. or both, in the State of Florida Stath change was authorized by the corporation's board of directors. I hereby accept the applicating its registered agont. I am familiar with, and accept the obligations of, Socion 607.0505, Florida Statutes. 10					82	Street	Address (P.O. Box Number is Not Acceptate	yle)			
Processor 10 the provisions of Socions 607.0502 and 607.1508, Florida Statutes. The above-named corporation submits this statement for the purpose of changing its registered agent. In the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. In the state of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. In the florida Statutes. SIGNATURE		DELI	RAY BEACH FL 33483		83	3					
Processor 10 the provisions of Socions 607.0502 and 607.1508, Florida Statutes. The above-named corporation submits this statement for the purpose of changing its registered agent. In the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. In the state of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. In the florida Statutes. SIGNATURE					84	City		85 Z ip	Code		
SIGNATURE STREET ADDRESS STREET AD						"		FL	į		
1			to the previsions of Sections 607.0 egistered agont, or both, in the Stam familiar with, and accopt the ob-	1502 and 607.1508, Florida Statut ate of Florida. Such change was ligations of, Section 607.0505, Fl	tes, the abor authorized b orida Statute	re-named by the cor as.	d corporation submits this statement for the proporation's board of directors. I hereby accept	urpose of changing it at the appointment as	is registered registered		
THE NAME STREET ADDRESS STREET A	511	SNATURE	······································		E: Registered A	jent signatur					
RAME STREET ADDRESS 12 NAME 1.3 STREET ADDRESS 25 715 5. COLEAN OLV D. # 208 Addition	12). 	THE RESERVE THE PROPERTY OF THE PARTY OF THE				ADDITIONS/CHANGES TO OFFICE				
STREET ADDRESS STRE			~	C) DECEIE				Change	L_J Addition		
THE					1.2 NAME		DATAL ALVA.	#- > 0			
THE			*		1,3 STREE	T ADDRESS	25.15 3. 00240 0000	25.709			
NAME			FRAEMVIEH MA 61050-	D not see		\$1-ZIP	HIGHLAND BEHCH, FL	, 2348 /	Addition		
STREET ADDRESS 2.3 STREET ADDRESS 2.4 CITY-ST-ZPP		i						Citatibe	☐ Yourion		
CHY-ST-ZIP					I '						
DELETE DELETE STITUE Change Addition NAME		1									
STREET ADDRESS SUBSTITUTE				DELETE		D1 E1	· · · · · · · · · · · · · · · · · · ·	Change	Addition		
STREET ADDRESS STRE	NA	VE			3.2 NAME		•				
DELETE	SH	REET ADDRESS			3.3 STREE	T ADDRESS	ļ [*]				
NAME	CIT	Y - \$1 - ZIP			3.4. CITY	ST-ZIP					
STREET ADDRESS	THI	i F	,	☐ DELETE	4.1 TITLE			Change	☐ Addition		
A CITY - ST - ZIP	NAI	VE			4. 2 NAM	:					
DELETE	SH	REET ADDRESS			4.3 STREE	t address	İ				
NAME 5.2 NAME STREFT ADDRESS 5.3 STREET ADDRESS CITY - ST - ZIP 5.4 CITY - ST - ZIP TILE DELETE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY - ST - ZIP CITY - ST - ZIP 6.4 CITY - ST - ZIP 6.4 CITY - ST - ZIP CITY - ST - ZIP	CIT	Y - S1 - ZIP				ST-ZIP		· · · · · · · · · · · · · · · · · · ·			
STHEET ADDRESS		-		☐ DELETE				L. Change			
CITY-ST-ZIP											
TITLE DELETE 6.1 TITLE Change Addition MAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-S1-ZIP 6.4 CITY-S1-ZIP	-										
AAME STREET ADDRESS CITY-ST-ZIP 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP				Decere		\$T - ZIP		T Charter	R. J. J. 1885.		
STHEET ADDRESS CITY-ST-ZIP 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP				☐ betele				шт спапре	I'''I Angiliou		
CITY-ST-ZIP 6.4 CITY-ST-ZIP							1				
			ny certify that the information supp	lied with this filing does not quali			stated in Section 119.07(3)(i) Florida Statute	s I further certify that	the		

ration or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name now, or on an attachment with an address. Lam an officer or director of the cappears in Block 12 or Block 13

SIGNATURE:

RECLOUIS ALAIMO

561-272-4332