SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT

PQ5000057788 (8)

FILED Sep 17 1997 8:00am Secretary of State

1 .	Corporation M. WE	Name GENER,		JOOO	07700	(0)								
Principal Place of Business Mailing Address														
;	24 SPRINGDA PALM SPRING	ALE CIR		24 SPRINGDALE CIR PALM SPRINGS FL 33461										
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										3. Date Incorporated or Qualified 3a. Date of Last Report				
										07/26/1995	0	8/14/199		╛
	Principal Place of Business				2a. Mailing Address					4. FEI Number		A	pplied For	_
21	21				26					65-0597253			lot Applicable	
22	Suite, Apt. #, etc.				Suite, Apt. #, etc.					5. Certificate of Status Desired			Additional lequired	
23	City & State	9		20	City & State					6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
23]	Zip	ip Country						ountry		This corporation owes or has paid the current year Intangible				
24	-,p	25			29 30			,		Personal Property Tax due June 30. Yes No				
 		9. Name	and Address of C		stered Agent		7			10. Name and Address of New R				1
	WE	GENER, P	ATRICIA				81	Name						٦
24 SPRINGDALE CIR PALM SPRINGS FL 33461							82	Street A	Addre	(P.O. Box Number is Not Acceptable)				-{
							83	<u> </u>						_
							84	,			FL	_	Code	
	 Pursuant to office or reagent. Lar GNATURE 	to the provis egistered ag m familiar w	ions of Sections 60 pent, or both, in the ith, and accept the	7.0502 and 6 State of Flori obligations o	607.1508, Florid ida. Such chang of, Section 607.0	a Statutes, the ge was author 505, Florida (e abov ized b Statute	e-named of the corp s.	corpc oratio	ration submits this statement for the n's board of directors. I hereby acce	purpose o ppt the app	f changing i pointment as	its registered s registered	
	GINATORE .	Signature, typied	or printed name of registr					ent signature	require	d when reinstating)	DATE			_ إ
12			OFFICER	S AND DIRE			13.			ADDITIONS/CHANGES TO OFF	ICERS AN			
TIT	1	D	IED DATOICIA		DEL		.1 TITLE	ļ				Change	☐ Addition	3
1	NAME WEGENER, PATRICIA STREET ADDRESS 24 SPRINGDALE CIR			· · · · · · · · · · · · · · · · · · ·			1.2 NAME						15	
ı	DALLA ODDINGO PL			H			1.3 STREET ADDRESS 1.4 CITY-ST-ZIP							۱ñ
TIT	Y-ST-ZIP	India	N 111100 E 007	<u> </u>	DEL		.4 CHY-3 LI TITLE	51- ZIP			-	Change	Addition	-16
NA:	·				المالية		2.2 NAME						וואסאוסוו	
4	REET ADDRESS					2.3 STREET ADDRESS 1								
1	Y-ST-ZIP						. 4 CITY-							
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NA	ME					4	. 2 NAME	Ì						1
STI	REET ADDRESS					4	3 STREE	ADDRESS						
City-St-ZiP				4.4 CITY-ST-ZIP			ST-ZIP						╛	
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NAME						5	2 NAME	Ì						
STA	reet address					5	.3 STREE	ADDRESS						
	Y-ST-ZIP				F-7		4 CITY-S	31-21F				-	, , , , , , , , , , , , , , , , , , , 	4
TIT					DEL		.1 TITLE	-				☐ Change	Addition	
NA							2 NAME]						
STREET ADDRESS						6	6.3 STREET ADDRESS							

14. Ido 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 if changed, or on an attachment with an address.