

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

FILED

May 12 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P95000060016 (9)

1. Corporation Name

FRONT RUNNERS, INC.

Principal Place of Business

7740 N.W. 63RD AVENUE  
PARKLAND FL 33067

Mailing Address

7740 N.W. 63RD AVENUE  
PARKLAND FL 33067-2410



3. Date Incorporated or Qualified

08/03/1995

3a. Date of Last Report

08/14/1996

4. FEI Number

65-0606165

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐ \$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes

☐ Yes ☒ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

P.O. Box 24148

27

Suite, Apt. #, etc.

28

City & State  
Ft. Lauderdale, FL

29

Zip  
33307

Country

30

U.S.A.

9. Name and Address of Current Registered Agent

PARK, CYNTHIA  
7740 N.W. 63RD AVENUE  
PARKLAND FL 33067

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature: typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE  
NAME BARBA, NANCY  
STREET ADDRESS % 7740 N.W. 63RD AVE.  
CITY- ST- ZIP PARKLAND FL 33073

TITLE D ☐ DELETE  
NAME ASHBRIDGE, SUSAN  
STREET ADDRESS % 7740 N.W. 63RD AVE.  
CITY- ST- ZIP PARKLAND FL 33073

TITLE D ☐ DELETE  
NAME STEVENS, CINDY  
STREET ADDRESS % 7740 N.W. 63RD AVE.  
CITY- ST- ZIP PARKLAND FL 33073

TITLE D ☐ DELETE  
NAME FEGERS, VICKI  
STREET ADDRESS % 7740 N.W. 63RD AVE.  
CITY- ST- ZIP PARKLAND FL 33073

TITLE D ☐ DELETE  
NAME PARK, CYNTHIA  
STREET ADDRESS % 7740 N.W. 63RD AVE.  
CITY- ST- ZIP PARKLAND FL 33073

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY- ST- ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY- ST- ZIP

2.1 TITLE ☐ Change ☐ Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY- ST- ZIP

3.1 TITLE ☒ Change ☐ Addition  
3.2 NAME Stevens, Cynthia  
3.3 STREET ADDRESS  
3.4 CITY- ST- ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY- ST- ZIP

5.1 TITLE ☐ Change ☐ Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY- ST- ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY- ST- ZIP

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 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.

SIGNATURE:

Vicki G. Fegers

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/97

Date

(954) 565-8393

Daytime Phone #

CR2E034 (9/96)