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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # POSOCOCOCO (O)

FILED Apr 14 1997 8:00am Secretary of State

507 N.E. 20TH STREET 507 N.E.				ing Address N.E. 20TH STREET A RATON FL 33431-8141							
							3. Date Inco 08/04/1	rporated or Qualified		te of Last R	leport
Principal Place of Business			2a. Mailing	Address		'	4. FEI Numb	er	1	A	oplied For
Suite, Apt. 1	#, etc		26 Suite, A	pt. #, etc.		·			r-1		ot Applicable Additional
2			27				5. Certificate	of Status Desired			equired
City & State	•		City & S	State		1	i i	ampaign Financing I Contribution			May Be to Fees
Zip		Country	Zip		Country	y ·		oration has liability for			
24	25		29		30		Florida Sta		☐ Yes	No	
©7 ⊂	9, Name an HARRY	d Address of Curi	ent Registered Ag	leur	81	Name	10, Name an	Audress of New I	negistered A	gent	
	TIBURON C	IR			82	Chroot A	Address (P.O. Box Nu	mbor in Alot Agent	able)		
	A RATON FL						Address (F.O. BOX NO	imber is Not Accept	ablet	 	
					83						
					84	City			FL	85 Zip	Code
11. Pursuant to	o the provision	s of Sections 607.0 , or both, in the Sta	502 and 607.1508, ate of Florida Such	Florida Statut	tes, the abov authorized b	re-named or y the corpo	corporation submits t	his statement for the ectors. I hereby acc	purpose of cept the appo	changing it	ts registered registered
SIGNATURE		nnieo name of registered	agent and title if applicable		E Registered Ag	4	corporation submits to oration's board of direction's board of directions (continued when reinstating)		purpose of cept the appo		
SIGNATURE		nnieo name of registered	agent and title if applicable			4	required when reinstating)	his statement for the ectors. I hereby acc	purpose of cept the appo		
SIGNATURE	Signature, typed or p P SZE, HARR	orteo rame of registered OFFICERS A	agent and title if applicable	e (NOT	E: Registered Ag	4	required when reinstating)		purpose of cept the appo	DIRECTOR	RS IN 12
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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 ghanged, or on an attachpent with an address.