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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DIVISION OF DOCUMENT # P95000061955 (7)

FILED Mar 28 1997 8:00am Secretary of State

	DLO & HORNE STUART, P.	Mailing Address				
Principal Place of Business 2836 SE FEDERAL HWY STUART FL 34994 US Mailing Address SNO LAKE WORTH ROAD SUITE 364 LAKE WORTH FL 58463-3275				Date Incorporated or Qualified		
					08/10/1995	05/01/1996
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			65-0602011	Not Applicable
Suite, Apt.	#, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired	S8.75 Additional Fee Required
City & Stat	():	City & State			6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
7 (p)	Country	Zip	Country		8. This corporation has liability for	or intangible tax under s. 199.032,
24	25		30		Florida Statutes	Yes No
	9. Name and Address of Currer		81 1	Name	10. Name and Address of New I	registered Agent
	rporate creations enterpr 1 pga blyd.	iises, inc.				
	TE 211		82 5	Street Addre	ess (P.O. Box Number is Not Accept	able)
	M BEACH GARDENS FL 33418		83			
171			94 (<u></u>		IAP 7 Codo
			84 (City		FL 85 Zip Code
agent La	to the provisions of Sections 607.050 registered agent, or both, in the State mi familiar with, and accept the oblig	ations of, Section 607.0505, Flor	ida Statutes. Registered Agent s		nd when reinstating)	DATE
12.	OFFICERS AN	D DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO OFF	
TITLE	D Horne, James J	ב טבונונ	1.1 TITLE 1.2 NAME	ŀ		Change Addition
STREET ADDRESS	2836 SE FEDERAL HWY		1.3 STREET AD	INDESS		
CHY-ST-ZIP	STUART FL 34994		1.4 CITY - ST - 2	· · · · · · · · · · · · · · · · · · ·		
THE	D	DELETE	2.1 TITLE			Change Addition
NAME	CERAVOLO, JOSEPH J		2.2 NAME			
STREET ADDRESS	2836 SE FEDERAL HWY		2.3 STREET AD	ODRESS		
CHY-S`-ZiP	STUART FL 34994		2. 4 CITY - ST -	ZIP		
TITLE		☐ DELETE	3.1 TITLE			Change Addition
NAME 6300 CT MODERATE			3.2 NAME	DDCCC		
STREET ADDRESS			3.3 STREET AD	- 1		
THLE		☐ DELETE	3.4. CITY-ST- 4.1 TITLE	CIT		Change Addition
NAME			4. 2 NAME			·- p- w
STREET ADDRESS			4.3 STREET AD	DRESS		
C(1) - S1 - 7(₽			4.4 CITY-\$1-7	ZIP		
TITLE		DELETE	5.1 TITLE	T		☐ Change ☐ Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET AD			
CITY - S1 - ZIF		DELETE	5.4 CITY - ST - 2	ZIP		Change Addition
TITLE		☐ DELETE	6.1 TITLE	ļ		Change Addition
NAME OTDEET ANNOTES			6.2 NAME	nocee		
STREEL ADDRESS			6.3 STREET AD	. !		
CHY-ST-7IF	by cort to that the information graphs	d with this bling door not quality	for the even		in Section 119 07(3)(i) Florida Stati	tas I further certify that the

4. I do hereby cert by 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 12 if changed, or on an attachment with an address.

SIGNATURE:

HATTELL DATE TO THE STATE OF SIGNING OFFICER OF DIRECTOR

3-24-97 (561)-781-0744