FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT #	P95000068969	(1))
L. Computation Name			

TRADITIONS OF DELRAY, INC.

Principal Place of Business 14050 GLENLYON CT DELRAY BEACH FL 33446

Mailing Address

14050 GLENLYON CT DELRAY BEACH FL 33446



					3. Date Incorporated or Qua	alified 3a. Date	of Last F	Report
2. Principal Pla	CO OF BUSINESS AMANTIL AVE	28 CIO SSIO U	ماماد 9	۸	4. FEI Number	N-1<01		Applied For
Suite Ant	A GIG		TOTO N	<u>. </u>	62-00	18350		Not Applicable
2	·, cu.	Suite Apt. # etc.			5. Certificate of Status Desi	red 🔲		Additional Required
3 DEURP	n Beau, fl.	28 COCONUT	CREE	K,FL	Election Campaign Finant Trust Fund Contribution		Adde	May Be d to Fees
334	Country 25 9. Name and Address of Current	29 33013	Gountry 30			Yes 🗌 No		199.032,
	5. Name and Address of Current	negistered Agent	81	Name	10. Name and Address of		Agent	
BIRKE, S	THART			Name 51		•		
	LENEYON CT		82	Street	ss (P.O. Box Number's Not A	able)		
	BEACH FL 33446		83	ADT.	4110			
			84	CitO			Teel =	- 0 - 5
			-	ررکر(onot creek	FL	85 3	3613
 Pursuant to or registere 	the provisions of Sections 607,0502 od agent, or both, in the State of Florid	and 607.1508, Florida Statute a. Such change was authorize	s, the above n	arned corporat	tion submits this statement for t	he purpose of cha	nging its	registered offic
familiar with	n, and accept the obligations of Section	n 607.0505, Florida Statutes.			. Al. =	ю арронинен: as	199/8(0190	agent. I am
SIGNATURE 🗶	Swall F. Bure		שוכ	HKL C	SIKKE			
12.	of final recovered or printed name, or registered against a OFFICERS AND		TE Registered Agent	t signature required v		DATE OF THE AND	DIDEATA	000 11140
ILF	PD	DELETE	1. 1 TITLE	PIC	ADDITIONS/CHANGES TO		Change	Addition
IAME	BIRKE, STUART		1.2 NAME	*	D LYONS ED	•	onunge	Radition
PREFT ADDRESS	14050 GLENLYON CT		1.3 STREET	ADDRESS 55	~~ • •			
ITY ST ZIP	DELRAY BEACH FL 33446		1.4 C(1) Y - ST	1 C F	xonur cha	er fl3	30	ા
ltf .		☐ DELETE	2 1 TITLE				Change	Addition
ARME			2.2 NAME					
THEET ACIDRESS			2 3 STREET A	ADDRESS				
1Y - S1 - 71P		- Donne	24 CITY- ST	- 7IP				
'tf		DELETE.	3 1 TITLE] Change	☐ Addition
AME THEFT ADDRESS			3 2 NAME					
FY-ST-2iF			33 STREET					
ILE	The state of the s	DELETE	3.4 CITY-ST 4. 1 TITLE	- ZIF			1 Chanca	- Addisor
AME			4.2 NAME			L.] Change	☐ Addition
THEFT ADDRESS			4.3 STREET /	ADORESS				
Pr St-ZiP			4.3 STILL 17					
'IF		DELETE	5 1 TITLE			Г) Change	☐ Addition
AME			5.2 NAME			_	_	
PREFIT ADDRESS			5 3 STREET A	ADDRESS				
IY S1, Z4P		- · · · · · · · · · · · · · · · · · · ·	5 4 CHTY-ST	- IIP				
11:		DELETE	6 1 TITLE) Change	☐ Addition
MH [6.2 NAME					
TELL ADDRESS			6 3 STREET A	ADDRESS				
DTY-ST-ZP	South that the fifth		6.4 CITY - ST	- 21P				
oath; that I a	certify that the information supplied wi the information indicated on this annua am an officer or director of the corpora Block 12 or Block 13 if changed, or on	tion or the receiver or trustee	empovins true empoveded to					

SIGNATURE: Stuart P. Bille
SIGNATURE OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR DE DEL DOCTOR DE DOCTO