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## 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 DOCUMENT #

**FILED** May 01 1997 8:00am Secretary of State

1. Corporation Name The Collabol St	ore of Vero Be	each	Inc				
Principal Place of Husiness	Maing Address						
(1 0 0	936s Seal Vero 13ch 335	STAY	RAIR				
Vero But, the	Valo 1001	31.3		3. Date incorporated or Qua	lified 3a. I	Date of Last F	Report
2. Pri cipal Place of Business	2a. Mailing Address	103	***************************************	4. FEI Number			nation For
21 Pra diprai mace or Business	26 26			65-06099	69		pplied For ot Applicable
Scute Apt #, etc	Suite, Apt. #. etc.	<del></del>		5. Certificate of Status Desir			Additional
City & State	27 City & State		•	6. Election Campaign Finan	cina	<del></del>	equired May Be
23	28			Trust Fund Contribution			to Fees
Zip Country	Ζφ <b>29</b>	30 Co.	untry	This corporation has liabi     Florida Statutes		ie tax under s	s. 199.032,
24 25 9. Name and Address o	[29] f Current Registered Agent	[30]		10. Name and Address of N	<del></del>		
Doman Silvia			81 Name				
Donaskunier 9365 Sea Grope Vero Beh, FE	^		82 Street	Address (P.O. Box Number is Not Ad	ceptable)		
JOOZ JEGICHOPE	L HR		63				*
Vero but, 72	32963		84 City			OF 7in	Code
·	-		" "		F		
11. Pursuant to the provisions of Sections office or registered agent or both, in tagent. I am familiar with and accept the provisions.  11. Pursuant to the provisions of Sections of Sections  12. Pursuant to the provisions of Sections  13. Pursuant to the provisions of Sections  14. Pursuant to the provisions of Sections  15. Pursuant to the provisions of Sections  16. Pursuant to the provisions of Sections o	607.0502 and 601.1508, Florida Stati he State of Elondii, Such change was no obligations of Section 607.0505. F	utes, the a authorize florida Sta	bove-named d by the corp tutes.	corporation submits this statement for poration's board of directors. I hereby	r the purpose accept the ar	of changing in pointment as	ts registered registered
			d Agent signature	required when reinstating)	DATE		
12. OFFIO	(BS AN ) DIRECTORS  DELETE	13. 1.1 T	ITI F	PRESIDENT.	OFFICERS A	ND DIRECTOR Change	RS IN 12 Addition
NAME	بالمانية المانية		AME	TWING IT ALMA	ar	E ondigo	
\$1868 CACORD do		1.3 \$	TREET ADDRESS	9365 Seatings	-07		
CHY St 2R	☐ DELETE		ITY-ST-ZIP	Vero 18ch, Pz	3341	Change	Addition
THE NAME		21 T				LL Change	L.J. Audilioin
STREET APORE 18.			TREET ADDRESS				
CHY 51 Z6			CITY-ST-Z:P		<del></del>		
10'11	₹ DEFELE	3.1 T 3.2 N				L. Charge	Addition
Nems Street above ss			TREET ADDRESS			14	102.
COV SUZ:			CITY-ST-7iP		-	$\cdot \cup $	7771
10.0	☐ DELETE	411		r		Chan	
NAME			VAME TREET ADDRESS				•
STEVEN MORPHS  CITY ST. 71:			HTY-ST-ZIP				
Total	☐ DELETE	51T			,	Change	Addition
IMM		52 N	1				
SPRIED MORESS			TREET ADDRESS				
7H 4	DELETE	611	ITY - ST - ZIP ITLE	100002	71631	Chinge	Addition
V 193	—	62 N	IAME	-05/02/97-	-01084	-019	
SIRST CHORNS		638	TREET ADDRESS	***165.00		*	
14. The hereby coady that the information	sumpling with this files does not our	hiv for the	exemption s	tated in Section 119 07(3)(i) Florida	Statutes I furth	ner certify the	t the
the population of early and this population	road or euros propolal appoiat report is	trip and	accurate and	that my cionature shall have the cor	na tanal effect.	as if made ur	nder eath: the
Lamilie of indicates on this artifactor of the corps appears in Block 12 or Block 13 if on	inged or on an attack ment with an ac	ddress.	ENDOGIO IIIO I		A.	arrar struct trity	- upo prod
SIGNATURE:	Unact TKI	h	_	4-25	47		
SIGNATURE AND	TYPED OR PRINTED NATE OF SIGNING OFFICE	ER OR DIREC	TOR	Date		Daytime Prione #	