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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000087773 (4)

ROBERT FREDERICK, INC.

Principal Place of Business

Mailing Address

FILED Apr 21 1997 8:00am Secretary of State



1440 N FEDERAL HWY FT LAUDERDALE FL 33316		1440 N FEDERAL HWY FT LAUDERDALE FL 33304-1459								
						3. Date Incorporated or Qualified 11/13/1995		te of Last R 12/1996	leport	
2. Principal f	Place of Business	2a. Mailing Address			4. FEI Number	_ 	Ar	pplied For		
21		26			65-0627019 Not Applicable					
Suite, Apt		Suite, Apt. #, etc. 27			5. Certificate of Status Desired	\$8.75 Additional Fee Required				
City & Sta		City & State		42-24		Election Campaign Financing Trust Fund Contribution			May Be to Fees	
Zф 24	25						This corporation has liability for intangible tax under s. 199.032, Florida Statutes			
	9. Name and Address of Curre	ent Registered Agent			Y	10. Name and Address of New Re	gistered A	geni		
	IALLCORN, ROBERT			81	Name					
1440 N FEDERAL HWY FT LAUDERDALE FL 33316				82		eet Address (P.O. Box Number is Not Acceptable)				
				83	l					
				84	City		FL	85 Zip	Code	
office or agent 1: SIGNATURE						rporation submits this statement for the pation's board of directors. I hereby accept		intment as	registered	
46	Signature, typed or pricted name of registered a	gent and file if applicable	(NOTE: Reg		eni Bignature requ	ulred when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE EDC AND	DIDECTOR	20 IAI 12	
12.	D OFFICERS AI	DIRECTORS DI	FLETE	13.		ADDITIONS/CHANGES TO OFFIC		Change	Addition	
NAME	SMALLCORN, ROBERT		LLL IL	1.2 NAME	1		•	TT CHRIST	Production	
STREET ADDRESS	A A A A A L ECOPORT LINED!		I		T ADDRESS					
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NAME			ŀ	2.2 NAME						
STREET ADDRESS			l l	2.3 STREE	T ADDRESS					
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Tillif		□ Di	ELETE	31 TITLE	 			Change	Additio	
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STREET ADDRESS					T ADDRESS					
CITY - ST - ZIP				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 or chapter 607, or on a variationment with an address.

SIGNATURE;

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

9APRIL97

984 566 - 4750

Daytime Phone #