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PROFIT CORPORATION ANNUAL REPORT

1997

**SIGNATURE:** 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 17 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #	P950000	91312	(5)

BEAU VI	STA DEVELOPMENT C		ailing Address		<del></del>					
1180 SYLVERTIS WATERFORD MI 48328		118	1180 SYLVERTIS WATERFORD MI 48328-2028			• ,				
							3. Date incorporated or Qual 11/30/1995		Date of Last F 2/13/1996	leport
	ace of Business	<b>├</b> ─┐	Mailing Address				4. FEI Number		<del></del>	oplied For
Suite, Apt	fr Δ]/	26	Suite, Apt. #, etc.				59-3351221			ot Applicable Additional
2]	1, 300	27	oute, the in ote.				5. Certificate of Status Desire	ad 🔲		equired
City & State	3		City & State				6. Election Campaign Financ			May Be
<u>Z</u> n.	Country	28	Zip	т с	Sountry		Trust Fund Contribution			to Fees
_Zip i∐	25	29	ειμ	30	Kour in y		<ol> <li>This corporation has liability</li> <li>Florida Statutes</li> </ol>		ile tax under s	. 199.032,
	9. Name and Address of C		tered Agent				10. Name and Address of No			
COF	PORATION SERVICE COM	PANY			81	Name				
1201	I HAYS STREET AHASSEE FL 32301-2525				82	Street Add	dress (P.O. Box Number is Not Acceptable)			
IALL	ANAGGE FL GEOUTEGEG				83					
					84	City			85 Zip	Code
					1 1	C,		F		
1. Pursuant t office or re agent. Lac	to the provisions of Sections 60 egistered agent, or both, in the miliar with, and accept the	07.0502 and 60 State of Floric Lobligations of	07.1508, Florida Stal la Such change wa "Section 607.0505,	tutes, the as authoriz Florida S	above zed by statutes.	named corpora	poration submits this statement for tion's board of directors, I hereby	the purpose accept the ar	of changing i opointment as	ts registered registered
SIGNATURE	Signature byped or printed name of regist	serve	<b>Łoż</b> Papplicable (N		tered Ager		poration submits this statement for tion's board of directors. I hereby ared when reliefating)  ADDITIONS/CHANGES TO	the purpose accept the ap	3-97	, 
SIGNATURE	Signature byped or printed name of regist	Dotteed Gred agent and time	<b>Łoż</b> Papplicable (N	NOTE: Registe	tered Ager		ired when reinstating)	the purpose accept the ap	3-97	, 
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