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Apr 22 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000091544 (3)

1. Corporation Name

HELENE MCROBERTS & ASSOCIATES, INC.



Principal Place of Business

434 HENDRICKS ISLE #12
FT LAUDERDALE FL 33301

Mailing Address

P.O. BOX 1030
KEY LARGO FL 33037-1030

2. Principal Place of Business

21 1126 South Federal Hwy
Suite, Apt. #, etc. #242

22 City & State
Ft. Lauderdale FL

23 Zip 33316 Country Broward

24

2a. Mailing Address

26 P.O. Box 1030

27 Suite, Apt. #, etc.

28 City & State
Key Largo, FL

29 Zip 33037 Country Monroe

30

3. Date Incorporated or Qualified

11/29/1995

3a. Date of Last Report

07/16/1996

4. FEI Number

65-0623920

Applied For

Not Applicable

5. Certificate of Status Desired

X

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes

No

10. Name and Address of New Registered Agent

81 Name

Helene McRoberts

82 Street Address (P.O. Box Number is Not Acceptable)

51 Mutiny Place

83

84 City

Key Largo

FL

85 Zip Code
33037

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P
NAME MCROBERTS, HELENE
STREET ADDRESS 51 MEETING PL.
CITY - ST - ZIP KEY LARGO FL 33037

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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STREET ADDRESS
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TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE President
1.2 NAME McRoberts, Helene
1.3 STREET ADDRESS 51 Mutiny Place
1.4 CITY - ST - ZIP Key Largo, FL 33037

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
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 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4-14-97 (305) 852-8556

CH2E034 (9/96)