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 # P96000000274 (6)

ARTHUR I, MOLL, INC.

FILED May 12 1997 8:00am Secretary of State

Principal Place of Business Mailing Address 2509 EGRET LAKE DRIVE 2509 EGRET LAKE DRIVE WEST PALM BEACH FL 33413 WEST PALM BEACH FL 33413-2161										
)	EROTTE SOTTO	יין ריין איני איניין די איניין			3.	Date Incorporated or Qualified	3a. Date o		eport	
A 6577516	In a land to the l	A. M.S. Address				12/29/1995	05/24/			
21 SAM	lace of Business	2a. Mailing Address			*	65-0641073	Applied For Not Applicable			
Surte, Apt. #, etc. Suite, Apt. #, etc.							\$8.75 Additional			
22 27					5.	. Certificate of Status Desired		Fee Re		
City & State	9	City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
<i>Z</i> ip	Country	Zip	C9U		. 8 ا	. This corporation has liability for			. 199.032,	
24	9. Name and Address of Curren	29 N Begistered Agent	30 //	in Bene	10	Florida Statutes J. Name and Address of New Re	Yes N			
MO		ii iioBioroioo v.Boin		81 Name		, tradito ento resolves es tradit ile	Sisterior Man			
MOLL, ARTHUR I 2509 EGRET LAKE DRIVE				82 Street Address (P.O. Box Number is Not Acceptable)						
WEST PALM BEACH FL 33413					TUUI BSS [less (P.O. Box laumber is not acceptable)				
				83						
			Ì	84 City			 8	5 Zip i	Code	
11 Discusset	to the evaluations of Contage 607 050	22 and 607 1509 Florida State	itas the at	oue pamed	corporati	on submits this statement for the s	FL	Dodoo ii	te registered	
agent La	to the provisions of Sections 607.050 egistered agent, or both, in the State in familiar with, and accept the oblig	of Florida. Such change was ations of, Section 607.0505, F	authorized lorida Stat	by the corputes.	oration's	board of directors. I hereby accept	ot the appoint	ment as	registered	
SIGNATURE	5 gnature, typical or printed name of registereo age	ent and title If applicable. (NO	TE: Registered	Agent signature r	required whe	en reinstating)	DATE			
12.		D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC				
1/flF	P	☐ DELETE	1.1 717				Ц	Change	Addition	
NAME.	MOLL, ARTHUR I 2509 EGRET LAKE DRIVE		1.2 NA	1						
SIREFT ADORESS C/TY-ST-ZIP		ILMAT ALLE DELALI PI		3 STREET AODRESS 4 CITY - ST - ZIP						
TITLE		VPS DELETE		2.1 TITLE				Change	Addition	
NAME	MOLL, JUDITH V		2.2 NA	ME)						
STREET ADDRESS	2509 EGRET LAKE DRIVE		2.3 ST	REET ADDRESS					•	
CITY-ST-ZP	WEST PALM BEACH FL			TY-ST-ZIP						
		☐ DELETE	3,1 7)7	1			니	Change	Addition	
NAME executations			32 NA	Į.						
STREET ADDRESS CITY-ST-ZIP				REET ADDRESS Ty-St-Zip						
TITLE		☐ DELETÉ	4.1 19					Change	☐ Addition	
N4MÉ			4.2 N	VME			·			
STREET ADDRESS			4.3 ST	REET ADDRESS						
CITY-S1-ZIP	·			Y-ST-ZIP	 .		····	·····		
THILF		☐ DELETE	5.1 111	1				Change	Addition	
NAME			5.2 NA	1						
STREET ADORESS				REET ADDRESS						
CITY+ST-ZIP TITLE		DELETE	5.4 CI 6.1 TI	Y-ST-ZIP				Change	Addition	
NAME		hand Case II	6.2 N/	Į.		•				
STREET ADORESS				REET ADDRESS						
CHTY - ST - ZIP			•	Y-ST-21P		·				
	by certify that the information supplie	d with this filing does not qua	lify for the	exemption st	tated in S	ection 119.07(3)(i), Florida Statute	s. I further ce	tify that	the	

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 SYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

130/47 56

\$61 964792 Daylime Phone #