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 # P9600005534 (8)

FILED

97 JUL -1 PH 1:10

SECRETARY OF STATE

(205 1/77-7858

MAINSAIL DESIGN COMPANY, INC. Principal Place of Business Mailing Address 944 NORTHWEST 9TH COURT MIAMI FL 33136 MIAMI FL 33136-3011					
	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21 Suite, Apt.	# atc	Suite, Apt. #, etc.		65-0371838	Not Applicable
22	7 , 010.	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	e	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28	·	Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8, This corporation has liability for	
24	25 S. Name and Address of Current		30	Florida Statutes 10. Name and Address of New Re	Yes No
THE	LAW FIRM OF LAWRENCE J SPI		81 Name	10.10(115	6
040 ALAKEDIA AMEAILAE				ress (P.O. Box Number is Not Acceptab	ule)
GOF	RAL GABLES FL 33134			reast, oDes Hamber is Not Acceptable	
	^		83 Q1/	1 NORTHWEST	- OIL COURT
			B4 City (2)	1 21	les Zin Code
44 Pursuant	to the provisions of Castions 607 0563	and 607 1509 Florida Statuta		oration a firmite this statement for the p	FL 33/38
office or r	registered agent, or both, in the State of	of Florida, Such change was a	uthorized by the corporat	poration submits this statement for the p tion's board of directors. I hereby accep	of the appointment as registered
	ini familiar with, and accept the obligat	ions of, Section 607,0509, Flo	NA IAN E	Time	1. = 97
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE	: Registered Agent signiture requir	red whe reinstaling)	DATE
12.	OFFICERS AND		13.	VADDITIONS/CHANGES TO OFFICE	
TITLE	PD HILL, WAYNE FREDERICK	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME STREET ADDRESS	944 NORTHWEST 9TH COURT		1.2 NAME		
CITY-ST-ZIP	MIAMI FL 33138		1.3 STREET ADDRESS 1.4 City-St-7ip		ا
TITLE	VID	DELETE	21 TITLE		Change Addition
NAME	OTTCHEN, CYNTHIA J		2.2 NAME	80000022	820085
STREET ADDRESS	944 NORTHWEST 9TH COURT		2.3 STREET ADDRESS		320166-014
CITY-ST-ZIP	MIAMI FL 33136		2. 4 CITY - ST - ZIP	****165	
TITLE		☐ DELETE	3.1 TITL€		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		į
CITY-ST-ZIP TITLE		DELETE	3.4. CITY+ST-ZIP 4.1 TITLE		Change Addition
NAME		_	4 2 NAME	()	
STREET ADDRESS			4.3 STREET ADDRESS	1,4	
CITY-ST-ZIP			4.4 CITY - ST - ZIP	12/	
TITLE		☐ DELETE	5.1 TITLE	, (☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		DELETE	5.4 CITY - S1 - ZIP		Change Addition
TALE		[_] DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME STREET ADORESS			62 NAME		
STREET ADDRESS			63 STREET ADDRESS		
CITY-ST-ZIP		The state of the s	6.4 CITY-ST-ZIP	11: 0: 1: 440.07/0V/) 51: 11 61-14:	

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 ennual 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.