## 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 # 1. Corporation Name

		Mailing Address 3194 PEBBLE BEACH DR LAKE WORTH FL 33467-12	19		
				3. Date incorporated or Qualified 01/26/1996	3a. Date of Last Report
2. Principal f	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0659085	Not Applicable
Suite, Apl. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
		City & State		6 Charles Caracles Floresia	
23		28		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for i	
24	25	29	30		Yes No
	9. Name and Address of Curre	nt Registered Agent		10. Name and Address of New Re	gistered Agent
	JL, BARBARA		81 Name		•
3194 PEBBLE BEACH DR		82 Street Add	ress (P.O. Box Number is Not Acceptab	ile)	
LAH	KE WORTH FL 33467		83		
ĺ			84 City		FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statute	s, the above-named corp	poration submits this statement for the p	urpose of changing its registered
office or agent 1 a	registered agent, or both, in the State am familiar with, and accept the oblig	e of Florida. Such change was a gations of, Section 607.0505, Flo	uthorized by the corporat rida Statutes.	tion's board of directors. I hereby accep	of the appointment as registered
SIGNATURE					
	Signature, typed or printed name of registered ag		Registered Agent signature requi		DATE
12.	PD OFFICERS AF	ND DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFIC	Change Addition
NAME	HOUSE, CHRISTINA		1.2 NAME		
STREET ADDRESS	CANCESTON		1.3 STREET ADDRESS		
CITY ST-ZIP	DAVIE FL 33330		1 4 CITY-ST-ZIP		
TITLE	VO	DELETE	21 TITLE		Change Addition
NAME	REUL, BARBARA		2.2 NAME		
STREET ADDRESS	3194 PEBBLE BEACH DR.		2.3 STREET ADDRESS		· '
CITY - ST - ZIP	LAKE WORTH FL 33487		2.4 CITY-\$1-ZIP		
TITLE	SO SOURCE OF THE	☐ DELETE	3.1 TITLE		Change Addition
NAMÉ	REUL, CHRISTOPHER		3.2 NAME		
STREET ADDRESS	3194 PEBBLE BEACH DR.		3.3 STREET ADDRESS		
CITY-ST-ZIP TILLE	LAKE WORTH FL 33467	DELETE	3.4 CITY-ST-ZIP 4.1 TITLE		Change Addition
NAME		5	4.2 NAME		CT Own/As CT LOGINGII
STREET ADDRESS			4.3 STREET ADDRESS		
City-S1-7P			4.4 CITY-ST-ZIP		I
DILE		DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		1
STREET ADDRESS			5.3 STREET ADDRESS		!
CITY-ST-ZIP			5.4 CITY - ST - ZIP		
TITLE		DELETE	6.1 TETLE		Change Addition
NAMÉ	1		6.2 NAME		ļ

14. I do nereby 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 estachment with an address.

64 CITY-ST-ZIP

6 3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS CITY - S1 - ZIP

**FILED** 

May 16 1997 8:00am

Secretary of State