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**PROFIT CORPORATION ANNUAL REPORT** 

1997



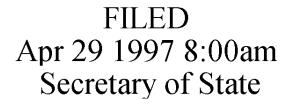
Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## POCUMENT # P96000013013 (3)

ATLANTIC HARBOUR DEVELOPMENT CORP.

| 1.11 | ICH. | יונגא | riace | OI E | Susine | 35 |
|------|------|-------|-------|------|--------|----|
| 816  | E.   | ATL   | ANTI  | G A  | VENUE  | :  |





| i i i i i i i i i i i i i i i i i i i           | IVIC  | ming Address   |                              |                    | 1  |  |                                      |                                       |
|---|---|--|------------------------------|--------------------|--|--|--------------------------------------|---------------------------------------|
| 818 E. ATLANTIC AVENUE<br>DELRAY BEACH FL 33483 |   | 616 E. ATLANTIC AVENUE<br>DELRAY BEACH FL 33483-5326 |                              |                    |  |  |                                      |                                       |
|   |   |  |                              |                    |  | Incorporated or Qualified 2/1996                             | 3a. Date of La                       | ast Report                            |
| 2. Principal Place of Business                  |   | 2a. Mailing Address                                  |                              |                    | 4. FEIN  | umber  |                                      | Applied For                           |
| 21  |   | 26   |                              |                    | 6  | 5-06999 <i>5</i> '   | 7                                    | Not Applicable                        |
| Sulte, Apt. #, etc.                             |   | Suite, Apt. #, etc.                                  |                              |                    | 5. Certificate of Status Desired See Required Fee Required |  |                                      |                                       |
| City & State                                    |   | City & State   |                              |                    | 6. Election Campaign Financing \$5.00 May Be               |  |                                      |                                       |
| 23  | 28  |  |                              |                    | Trust  | Fund Contribution  |                                      | ded to Fees                           |
| <del></del>                                     | · • • • • • • • • • • • • • • • • • • •                         | <b>Z</b> ip  | Country                      | 4                  |  | corporation has liability for i                              |                                      | fer s. 199.032,                       |
| 24 25 9. Name and                               | 29 Address of Current Regist                                    | ared Ament   | 30                           |                    |  | a Statutes L and Address of New Re                           | Yes No                               |                                       |
| -CORPORATION CE                                 |   | - Agont  | 81                           | Name 👡             | - IV. INAIII   | and Address of New Re  | Jistered Agent                       |                                       |
| 4004_444V0_07DEC                                | T   | _  |                              | 7                  | DARK   | L. KRALL   | _                                    |                                       |
|   | 00001-0505  |  | 82                           | Street Add         | iress (P.O. Bo   | x Number is Not Acceptab                                     | c)                                   |                                       |
| TACCATACCETE                                    | OCOUT-LOCO  |  | 83                           | 6/16               | C' 4   | CHNTIC AVE   | <u>-</u>                             |                                       |
|   |   |  | "                            |                    |  |  |                                      |                                       |
|   |   |  | 84                           | City               | 0.453  | a con col  | <b>-,</b> 85                         | Zip Corlo                             |
| 11. Pursuant to the provisions                  | of Sections 607 0602 and 60                                     | 7 1508 Florida Statut                                | on the shou                  | DEC                | <u> </u>   | BEACH  | FL  °                                | 33983                                 |
| office or registered agent,                     | or both, in the State of Florid<br>nd accept the obligations of | a. Such change was a                                 | es, me abov<br>authorized by | y the corpora      | poration stibil<br>ition's board o                         | nts this statement for the p<br>of directors. I hereby accep | urpose er changi<br>I the appointmor | ng its registered<br>it as registered |
| (1/20-1/  | nd accept the obligations of                                    | Section 607.0505, Flo                                | orida Statute:               | S.                 |  |  | 210100                               | - ·                                   |
| SIGNATURE Signature, typod or prin              | nted name of registered agent and title it                      | Language (NOT)                                       | Chaptered An                 | and along the same | red when reinstation                                       |  | 11817.                               |                                       |
| 12.   | OFFICERS AND DIREC  |  | 13.                          | eni signature rego |  | ONS/CHANGES TO OFFIC   | RS AND DIREC                         | TORIS IN 12                           |
| TITLE PSD                                       |   | ☐ DELETE   | 1.1 TITLE                    |                    |  |  | Char                                 |                                       |
| NAME MALLO                                      | V. SUSANI   |  | 1.2 NAME                     |                    |  |  |                                      |                                       |
| STREET ADDRESS QAT NY                           | CINTH DRIVE   | •  | 1.3 STREET                   | ADDRESS            |  |  |                                      |                                       |
| CITY-ST-ZIP DEL Q AY                            | , SUSAN<br>CINTH DRIVE<br>BEACH, FL                             | 33483  | 1.4 CITY - S                 |                    |  |  |                                      |                                       |
| TITLE   |   | DELFTE   | 2.1 TITLE                    |                    |  |  | ☐ Char                               | nge Addition                          |
| NAME  |   |  | 2.2 NAME                     |                    |  |  | •                                    | -                                     |
| STREET ADDRESS                                  |   |  | 2.3 STREET                   | ADDRESS            |  |  |                                      | ,                                     |
| CITY-ST-ZIP                                     |   |  | 2.4 CHY+                     | ST-ZIP             |  |  |                                      |                                       |
| TITLE   |   | DELETE   | 3.1 TITLE                    |                    |  |  | Char                                 | nge Addition                          |
| NAME  |   |  | 3.2 NAME                     |                    |  |  |                                      |                                       |
| STREET ADDRESS                                  |   |  | 3 3 STREET                   | ADDRESS            |  |  |                                      |                                       |
| CITY+ST-ZIP                                     |   |  | 3 4. CITY - 9                | ST-ZIP             |  |  |                                      |                                       |
| TITLE   |   | ☐ DELETE   | 4.1 TITLE                    |                    |  |  | ☐ Char                               | nge Addition                          |
| NAME  |   |  | 4. 2 NAME                    |                    |  |  |                                      |                                       |
| STREET ADDRESS                                  |   |  | 4.3 STREET                   | ADDRESS            |  |  |                                      |                                       |
| CITY-ST-ZIP                                     |   |  | 4.4 CITY - S                 | 1-ZIP              |  |  |                                      |                                       |
| TITLE   |   | □ DELFTE   | 5.1 TITLE                    |                    |  |  | Char                                 | nge Addition                          |
| NAME  |   |  | 5.2 NAME                     |                    |  |  |                                      |                                       |
| STREET ADDRESS                                  |   |  | 5.3 STREET                   | ADDRESS            |  |  |                                      |                                       |
| CITY-ST-ZIP                                     |   |  | 5.4 CITY - S                 | 1-7IP              |  |  |                                      |                                       |
| TITLE   |   | ☐ DELETE   | 6.1 TITLE                    |                    |  |  | ☐ Char                               | ige Addition                          |
| NAME ,  |   |  | 62 NAME                      |                    |  |  |                                      |                                       |
| STREET ADDRESS                                  |   |  | 6.3 STREET                   | ADDRESS            |  |  |                                      |                                       |
| CITY-ST-ZIP                                     |   |  | 6.4 CITY-S                   | 1-2IP              |  |  |                                      |                                       |

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 eath; 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 12 if changed, or on an attachment with an address.

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