FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P96000014978 (6)

FILED Apr 29 1997 8:00am Secretary of State

N. REAGAN Principal Place of 8 302 N.E. 8TH AVENI DELRAY BEACH FL	UE	Mailing Address 302 N.E. 8TH AVENUE DELRAY BEACH FL 3346	23-5525			
					3. Date Incorporated or Qualified 02/14/1996	3a. Date of Last Report
2. Principal Place of	AHantic Ave	28. Mailing Address 26 30 Z N E 8	sh Aug	·	4. FEI Number 65-064420	Applied For Not Applicable
Suite, Apt. #, etc 22 1 10 4		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	y Beach FL	City & State Del Cay B	each	FL	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
24 3348	33 25 Palm Beau	29 33483	Countr	m Beach	8. This corporation has liability for Florida Statutes	
	Name and Address of Current	Registered Agent		·	10. Name and Address of New Ro	egistered Agent
REAGAN			81			
302 N.E. 8TH AVENUE DELRAY BEACH FL 33483				Street Addre	ess (P.O. Box Number is Not Accepta	ble)
D 66.6(1	DE 1011 1 2 00 100		83	}		
			84	City	Markette Missesser	85 Zip Code
34 6	007.000	and COT ACOD Fladida Cont	daa tha sha		aration a density this statement for the	FL
office or registe agent 1 am fan SIGNATUR Signar	7/2			y the corporati s. ent signature require		4/2C/91
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFI	
NAME RE	AGAN, N	DELETE	1.1 TITLE 1.2 NAME			Change Addition
	2 N.E. 8TH AVENUE			T ADDRESS		
	LRAY BEACH FL 33483		1.4 CITY-			
TITLE D		☐ DELETE	21 TITLE			Change Addition
	RMS, B		2.2 NAME	1		
	2 N.E. 8TH AVENUE ELRAY BEACH FL 33483			T ADDRESS		1.0 may
CHY-S1-7IP UT	LIMI DEAUTI PL 33403	DELETE	2.4 CITY 3.1 TITLE	-ST-ZIP		Change Addition
NAME			3.2 NAME			- · ·
STREET ADDRESS			3.3 STREE	T ADDRESS		
CITY - ST - ZIP	an die all Steel Pryson op 1 au names kalasta versten grown 1 dans habe hat strover de grown die dat strover d		3.4. CITY	ST-ZIP	·	
TITLE		[] DELETE	4.1 TITLE			Change Addition
NAME STREET ADDRESS			4. 2 NAM	T ADDRESS		
CITY-SL-762			4.4 CITY-	1	•	
THUE		DELETE	5.1 TITLE	31-211		Change Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREE	T ADDRESS		
CITY - S1 - 7IP			5.4 CITY-	ST-ZIP		·
THLE		L DELETE .	6.1 TIFLE			Change Addition
NAME			6.2 NAME	1		
STREET ADDRESS				T ADDRESS		
14. I do hereby ce	rtify that the information supplied	with this filing does not aux	6.4 City- alify for the ex	emption stated	in Section 119.07(3)(i), Florida Statuti	es. I further certify that the
information ind Lam an officer	licated on this annual report or su or director of the corporation or thick 12 or Block 12 if changed, or o	pplemental annual report is ne a ceiver or trustee empo	true and acc	urate and that cute this repor	my signature shall have the same leg t as required by Chapter 607, Florida	al effect as if made under oath, that Statutes; and that my name
SIGNATUR	E. SIGNATURE AND TYPED OR P	RINTED NAME OF SIGNING OFFICE	ER OR DIRECTOR		4/22/97	561-246-8111 Davinio Phone