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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000020357 (5)

FILED May 01 1997 8:00am Secretary of State

	PRIME COMMERCIAL COR	<u> </u>	e e e e e e e e e e e e e e e e e e e							
Principal Place of Business Mailing Address						i rabiinal sin rhing athir Mater abirr	Shill Skind itaki	SOINE ILIAL BILLI	(Bai (AB)	
5401 SOUTH KIRKMAN ROAD STE 500 ORLANDO FL 32818 5401 SOUTH KIRKMAN ROAD STE 500 ORLANDO FL 32819-7911										
			· · · · · · · · · · · · · · · · · · ·			 Date Incorporated or Qualifi 03/04/1996 	ed 3a. D	ate of Last R	VE	
2. Principal Ma 11 9/8 N	ice of Businoss E 24th Lone	2a. Mailing Address 26. 9/8 NE 2	44	Lane		59-337/ 22	9		oplied For ot Applicable	
Suite Apt	etc.	Suite, Apt. #, etc.	- · ·	1 0		5. Certificate of Status Desired		\$8.75	Additional	
City & State	1 and 2	City & State	and						equired	
3 Cape	Coral. Florida	28 Cape Coxo	1,71	on da	>	Election Campaign Financin Trust Fund Contribution	° 🗆	\$5.00 Added (May Be to Fees	
7ip 7	Country	29.33909	Cou	ntry USFA	7	B. This corporation has liability			199.032	
4 307	9, Name and Address of Current		30	40//		Florida Statutes O. Name and Address of New	Yes Registered			
LANE	, PAUL C			81 Name	<u>`</u>					
FACE COURT MOVEMEN DOED OFF FOO					Address (P.O. Box Number is Not Acceptable)					
ORLANDO FL 32819										
			١	83						
				84 City			FL	85 Zip (Code	
11. Pursuant to office or re agent. Lan	o the provisions of Sections 607,0502 ogistered agent, or both, in the State of Infamiliar with, and accept the obligat	and 607.1508, Florida Stat of Florida. Such change wa- tions of, Section 607.0505, I	utes, the all s authorize Florida Stal	pove-named of by the corp	corpora coration	tion submits this statement for t s board of directors. I hereby a			s registered registered	
SIGNATURE .										
12.	Signature: typed or printed name of registered agen OFFICERS AND		OTE: Registere	d Agent signature	required w	hen reinstating) ADDITIONS/CHANGES TO O	DATE FEICERS AN	D DIRECTOR	RS IN 12	
irit	D OWNER	DELETE	1,1 1	ri E	7	ADDITIONS/CHANGES TO O	TOUCHS AIN	Change	Addition	
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NAME			4.21	AME	de	erlich , WALDE	MAD	• `		
STREET ADDRESS			4.3 ST	REET ADDRESS	54	29 S.W. 25H	h Pla	ce.		
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TITLE		☐ DELETE	5.1 TI	TLE	7	_		☐ Change	Addition	
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CHY-SI-ZIP	corrier that the information manufacture	with this filing does not an	- 1'4 - 4 4	TY-ST-ZIP	talod in	Section 110 07/2Vil Finding Ct	tidos I fireth	or cortifu that	the	
	y certify that the information supplied i indicated on this annual report or su licer or director of the corporation or i i Block 12 or Blood his the house, or	with this filing does not quipplemental annual report in the receiver or trustee empt on an attachment with an a	- 1'4 - 4 4		tated in I that my report as	Section 119.07(3)(i), Fiorida Ste signature shall have the same required by Chapter 607, Flori	legal effect a da Statules:	er certify that as if made un and that my r	ider oath; name	

SIGNATURE:

4-24-97

Daylime Phone #

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