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

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Mar 07 1997 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000023440 (6)

731 COF	RP.						
Principal Place	of Business	Mailing Address				iii ediib iideo iiiii dib ii bid ii d i	
19867-D PLANTERS BLVD. 19867-D PLANTERS BLVD. BOCA RATON FL 33434 BOCA RATON FL 33434-5250							
					3. Date Incorporated or Qualified 03/11/1996	3a. Date of Last Rep	ort
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number 65-0646700	 	lied For Applicable
Suite, Apt #	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	☐ \$8.75 Ad Fee Requ	
City & State	!	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 M Added to	
Zip	Country 25	Zip 29	30 Cou	intry	This corporation has liability for Florida Statutes	r intangible tax under s. 1 Yes 🔲 No	99.032,
	9. Name and Address of Currer		<u> </u>		10. Name and Address of New R	egistered Agent	
FRIE	OMAN, AONALD B			81 Name	AUL Ehrlich		
	W RALMETTO PARK RD			62 Street Add	ess (P.O. Box Number is Not Accepta	able) Blud	
	E 300			83	67-0 PLANTERS	2 12100	
800	A RATON FL 93432						
	1			84 City oc	A RATON	FL 85 Zip Co	
office or re	o the provisions of Sections 607.050 egistered agent, or both, in the State in familiar with, and accept the oblig	of Florida. Such change was :	authorize	d by the corporat	poration submits this statement for the tion's board of directors. I hereby acco	purpose of changing its a ppt the appointment as re	registered igistered
JIGINATURE .	Signate in typed or prutted earlie of legisleted agr			d Agent signature requi		DATE	
12.		D DIRECTORS DELETE	13.	71.5	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS Change	IN 12 Addition
TITLE NAME	d Ehrlich, saul	C'I pertit	1.3 T			Onlings	7.00///0//
STREET ADDRESS	19867-D PLANTERS BLVD.			TREET ADDRESS			
CITY-ST-ZIP	BOCA RATON FL 33434			ITY-ST-ZIP			
TITLE	***************************************	DELETE	2.1 T			Change	Addition
NAME			2.2 N	AME			
STREET ADORESS			2.3 \$	TREET ADDRESS			
CITY-ST-ZIP			_	CITY-ST-ZIP			Large
TITLE		L_] DELETE	3.1 7			L. Change	Addition
NAME.			3.2 N	1			
STHEET ADDRESS				TREET ADDRESS			
DITY: ST: ZIP TITLE		DELETE	3.4. (4.1 T	CITY-ST-ZIP OTLE	***************************************	☐ Change	Addition
NAME		berrall go year as , as		IAME		*	
STREET ADDRESS				TREET ADDRESS			
City-S1-7/P				ITY - ST - ZIP			
TITLE		☐ DELETE	5.1 T			Change	Addition
NAME			52 N	AME			
STREET ADDRESS			535	TREET ADDRESS			
CITY - ST - ZIF		T Beiter	_	ITY-ST-ZIP		[Observe	Addition
TITLE		☐ DELETE	611			L. Change	Addition
NAME			62 N				
STREET ADORESS				TREET ADDRESS			
City-St-7IP	ny certify that the information supplie	ed with this filing does not qual	ify for the	exemption state	d in Section 119.07(3)(i), Florida Statu	tes. I further certify that the	 10
informatio Lam an of	w indicated on this annual raport or	supplemental annual report is ir the receiver or trustee empor	true and wered to	accurate and the	t my signature shall have the same led it as required by Chapter 607, Florida	gal effect as if made unde Statutes; and that my na	er oatn: tnat