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 # P96000025787 (8)

A.J. ASSOCIATES OF DUCK KEY, INC.

Principal	Place of	Business
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Mailing Address

100 SE SECOND ST STE 3350 MIAMI FL 33131 100 SE SECOND ST STE 3350 MIAMI FL 33131-2151

FILED Jun 03 1997 8:00am Secretary of State



								3. Date Incorporated or Qua 03/18/1996	lified 3s	. Date	ار ق	Report	7		
2 Principal F	2. Principal Place of Business 2a. Mailing Address									4. FEI Number			T	pplied For	1
21			26. Walling Address				65-0658870	,			ot Applicable	1			
Suite, Apt. #, etc.					Suite, Apt. #, etc.								Additional	1	
27										5. Certificate of Status Desire	ed 🗆		-	equired	
City & State City & State 28					& State					 Election Campaign Finance Trust Fund Contribution 	ing [May Be to Fees	
Zip	Country Zip Cou				intry				ty for integra	iible tav			1		
24		25	•	29		30	,		}	8. This corporation has liability for intangible tax under s. 199.032,					
	9. Name		s of Current		Agent	<u> </u>				10. Name and Address of No					1
ALLISON, JOHN R III							81	Name							1
100 SE SECOND ST STE 3350							B2	Division	A -1-d	/D O D					İ
MIAMI FL 33131						62	Street	Adores	ss (P.O. Box Number is Not Acc	ceptable)				1	
	(_ 00	•					83								1
i														- <u>-</u> -	
							84	City			F	= ⁶	5 Zip	Code	
11. Pursuant	to the provis	ions of Sec	tions 607.0502	and 607.15	08, Florida Statuto	es, the al	LL.I.	-named	corpor	ration submits this statement fo	r the purpos	e of ch	angina i	ts registered	1
office or	registered ag	ent, or both	n, in the State o	Florida Su	ich change was a tion 607.0505, Flo	uthorize	d by	the corp	poratioi	n's board of directors. I hereby	accept the	appoint	mont as	registered	1
1 -	ATT IQUIUMAT YY	iii, and acc	spr trie obligati	Oris Di, Dec	11011 007.0303, 1 k	mun eta	utua								
SIGNATURE	Signature typed	or printed name	e of registered agent	and little if applic	cable (NOTE	: Registero	I Ager	n; ≾ignature	required	when reinstating)	DA1	rt			l
12.			FFICERS AND			13.				ADDITIONS/CHANGES TO	OFFICERS .	AND DI	RECTO	RS IN 12	Ì
TITLE DIP DELFTE 117						117	TLE						Change	Addition	800
NAME PETER RUSHAN				1.2 N	AME.		<u> </u>								
STREET ADDRESS	NAME PETER RYSMAN STREET ADDRESS 6450 E JR. COLLEGE RD. 12				1.3 \$	REET :	ADORESS							Ens.	
CITY-ST-ZIP	KEY WEST, FL 33040 140				1Y - S1		ļ						Š		
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NAME					32 N	AME)						Ì	
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NAME	1					6.2 N	ME		[
STREET ADDRESS						6.3 S1	REET	ADDRESS							
CITY-ST-ZIP	1					6.4 CI	IY-SI	- 712							
	by certify the	t the inform	ation supplied s	with this filir	or does not qualif				tated in	Section 119 07(3)(i) Florida S	tatules I fur	ther ce	tify that	the	1

. 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 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 prianged, or on an attachment with an address.