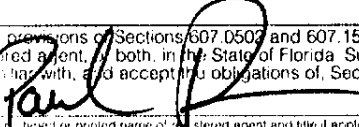
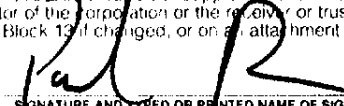


FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED
May 19 1997 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P 26240 1. Corporation Name ALLANTE MANAGEMENT COMPANY		3. Date Incorporated or Qualified March 25, 1996 3a. Date of Last Report	
Principal Place of Business 1326 N. Dixie Highway, Suite 6 Lake Worth, Florida 33460		Mailing Address	
2. Principal Place of Business 21 1326 N. Dixie Highway	2a. Mailing Address 26 Suite, Apt. #, etc.	4. FEI Number 65-0676231	Applied For Not Applicable
22 Suite 6	27 City & State	5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
23 Lake Worth, Florida	28 City & State	6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
24 33460	29 USA	30	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
		81 Name PAUL A. PARISI	
		82 Street Address (P.O. Box Number is Not Acceptable) 1326 N. Dixie Highway, Suite 6	
		83	
		84 City Lake Worth,	85 Zip Code FL 33460
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.			
SIGNATURE 		PAUL A. PARISI 4/29/97	
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY, ST, ZIP P, S, T, D ANTHONY MANINO P.O. Box 291617 Boca Raton, FL 33429	☒ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 1326 North Dixie Hwy. Suite # 6 Lake worth, FL 33460	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY, ST, ZIP VP, D PAUL A. PARISI 622 NW 13 Street Boca Raton, Florida 33486	☒ DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 5250 LAS VERDES CIRCLE #115 DELRAY BEACH, FL 33484	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY, ST, ZIP	☐ DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY, ST, ZIP	☐ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY, ST, ZIP	☐ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY, ST, ZIP	☐ DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 600002197896 -06/02/97--01079--030 ***165.00	☐ Change ☐ Addition
14. 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 changed, or on an attachment with an address.			
SIGNATURE: 		PAUL A. PARISI, VICE PRESIDENT 4/29/97	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	

CR2E034 (9/96)