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 # P96000037530 (8)

CHERYL L. FINE ENTERPRISES, INC.

Principal Place of Business 11839 NW 28 STREET CORAL SPRINGS FL 33071 Mailing Address

11839 NW 28 STREET CORAL SPRINGS FL 33065-3313 FILED

97 JUL 14 AM 10: 08

SECRETARY OF STATE TALLAHASSEE, FLORIDA



2. Principal Place of Business 21 10695 NW 1746 Court 26 10695 NW 1746 Court (65-0653257 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. City & State Court Springs Fla 28 Court Spring Trust Fund Contribution Country Zip C						3. Date Incorporated or Qualified 05/01/1996	3a. Date of Last Report	
Display Disp	2. Principal Pl	lace of Business	2a. Mailing Address	. 4.		4 JFI Number	TApplied For	
Solito, Apt. 4, etc. 2 20 20 20 20 20 20 20 20 20 20 20 20 20		95 NW 175 COUT	26 10695 NU) 17 ¹² / ₄	oura	65-0653257	 ' ' 	
Foo Required Foo					<u> </u>		SR 75 Additional	
Added to Press Adde	22		27			5. Certificate of Status Desired	1 1 '	
Page Company Page Company Page Company Page Company Page Company Page	City & State		City & State	ring,	Tha	, , ,		
Page Company Page Company Page Company Page Company Page Company Page	Ziρ		Zip	Country			tangible tax under s. 199.032,	
FINE, CHERYL L 11839 NW 28 STREET CORAL SPRINGS FL 33071 11. Pursuant to the provisions of Socions 607.0502 and 607.1508, Florida Statutes, the address (P.O. Box Number is Not Acceptable) 11. Pursuant to the provisions of Socions 607.0502 and 607.1508, Florida Statutes, the composition submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the composition submits this statement for the purpose of changing its registered agent, and the first purpose of the composition and the statement of the provision of the composition and the statement of the composition and the statement of the provision of the composition and the statement of the provision of the composition and the statement of the provision of the composition and the statement of the provision of the composition and the statement of the composition and the statement of the provision of the composition and the statement of the composition and the statement of the provision of the composition and the statement of the provision of the composition and the statement of the provision of the composition and the statement of the provision of the composition and the statement of the provision of the composition and the statement of the provision of the composition and the statement of the provision of the composition and the statement of the provision of the composition and the statement of the provision of the composition and the statement of the provision and the statement of the statement of the statement of the statement of t	24 3 3 0 2	十 25 USA		oles A		· -		
TINE, VICENTIL 111839 MW 26 STREET CORAL SPRINGS FL 33071 88	9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent							
CORAL SPRINGS FL 33071 Ba	FINE	, CHERYL L						
CORAL SPRINGS FL 33071 Ba	ALAMA ARM ON OTREFT				82 Street Address (P.O. Box Number is Not Acceptable)			
1. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes. No above named corporation submits this statement for the purpose of changing its registered agent. I am a familiar with, and accopt the obligations of, Section 607.0505, Florida Statutes agent. I am a familiar with, and accopt the obligations of, Section 607.0505, Florida Statutes agent. I am a familiar with, and accopt the obligations of, Section 607.0505, Florida Statutes agent. I am a familiar with, and accopt the obligations of, Section 607.0505, Florida Statutes. 12	CORAL SPRINGS FL 33071							
TILL PURSUANT TO the provisions of Socions 607.05.02 and 607.15.08, Florida Statutos, the above named corporation submits this statement for the pursuance of changing its registered agent. I am familiar with, and accopt the obligations of, Section 607.05.05, Florida Statutos, agent. I am familiar with, and accopt the obligations of, Section 607.05.05, Florida Statutos, agent. I am familiar with, and accopt the obligations of, Section 607.05.05, Florida Statutos, agent. I am familiar with, and accopt the obligations of, Section 607.05.05, Florida Statutos, agent. I am familiar with, and accopt the obligations of, Section 607.05.05, Florida Statutos, agent. I am familiar with, and accopt the obligations of Section 607.05.05, Florida Statutos, agent. I am familiar with a decopt the obligations of Section 607.05.05, Florida Statutos, agent. I am familiar with a decopt the obligations of Section 607.05.05, Florida Statutos, agent. I am familiar with a decopt the obligation of Section 607.05.05, Florida Statutos, and a decopt the obligation of Section 607.05.05, Florida Statutos, and a decopt the obligation of Section 607.05.05, Florida Statutos, and a decopt the obligation of Section 607.05.05, Florida Statutos, and a decopt the obligation of Section 607.05.05, Florida Statutos, and a decopt the obligation of Section 607.05.05, Florida Statutos, and a decopt the obligation of Section 607.05.05, Florida Statutos, and a decopt the obligation of Section 607.05.05, Florida Statutos, and a decopt the obligation of Section 607.05.05, Florida Statutos, and a decopt the obligation of Section 607.05.05, Florida Statutos, and a decopt the obligation familiar statutos, and a decopt the obligation of Section 607.05.05, Florida Statutos, and a decopt the obligation of Section 607.05.05, Florida Statutos, and a decopt the obligation of Section 607.05.05, Florida Statutos, and a decopt the obligation of Section 607.05.05, Florida Statutos, and a decopt the obligation of Section 607.05.05, Florida Statutos, and a decopt the obligat				83			•	
TILL PURSUANT TO the provisions of Socions 607.05.02 and 607.15.08, Florida Statutos, the above named corporation submits this statement for the pursuance of changing its registered agent. I am familiar with, and accopt the obligations of, Section 607.05.05, Florida Statutos, agent. I am familiar with, and accopt the obligations of, Section 607.05.05, Florida Statutos, agent. I am familiar with, and accopt the obligations of, Section 607.05.05, Florida Statutos, agent. I am familiar with, and accopt the obligations of, Section 607.05.05, Florida Statutos, agent. I am familiar with, and accopt the obligations of, Section 607.05.05, Florida Statutos, agent. I am familiar with, and accopt the obligations of Section 607.05.05, Florida Statutos, agent. I am familiar with a decopt the obligations of Section 607.05.05, Florida Statutos, agent. I am familiar with a decopt the obligations of Section 607.05.05, Florida Statutos, agent. I am familiar with a decopt the obligation of Section 607.05.05, Florida Statutos, and a decopt the obligation of Section 607.05.05, Florida Statutos, and a decopt the obligation of Section 607.05.05, Florida Statutos, and a decopt the obligation of Section 607.05.05, Florida Statutos, and a decopt the obligation of Section 607.05.05, Florida Statutos, and a decopt the obligation of Section 607.05.05, Florida Statutos, and a decopt the obligation of Section 607.05.05, Florida Statutos, and a decopt the obligation of Section 607.05.05, Florida Statutos, and a decopt the obligation of Section 607.05.05, Florida Statutos, and a decopt the obligation of Section 607.05.05, Florida Statutos, and a decopt the obligation familiar statutos, and a decopt the obligation of Section 607.05.05, Florida Statutos, and a decopt the obligation of Section 607.05.05, Florida Statutos, and a decopt the obligation of Section 607.05.05, Florida Statutos, and a decopt the obligation of Section 607.05.05, Florida Statutos, and a decopt the obligation of Section 607.05.05, Florida Statutos, and a decopt the obligat				84 (City		85 Zip Code	
##### STREET ADDRESS STREET DELETE STREET ADDRESS STREET ADDRES					<i>.</i>		FL	
12	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							
TITLE	SIGNATURE	Signature, typed or printed name of registered agent a	nd lite if applicable (NOTE: F	Registered Agenil s	ignature required	d when reinstating)	DATE	
Time	12.	OFFICERS AND D		13.		ADDITIONS/CHANGES TO OFFICE	THE PERSON AND ADDRESS OF THE PERSON NAMED AND ADDRESS OF THE	
1839 NW 28 STREET	TITLE		☐ DEL ETE	1.1 TITLE			Change Addition	
DELETE DELETE DELETE	NAME			1.2 NAME		annonee	aggezn	
Delete D	STREET ADDRESS				DRESS	-07/16/9	9701099n16	
NAME	CITY-ST-ZIP	CORAL SPRINGS FL 33071		1.4 CITY-\$1-7	Ib.		00 28***165 00	
STREET ADDRESS 23 STREET ADDRESS 24 CITY-ST-ZIP	TITLE		☐ DELETE 2.11			The state of the s	Change Addition	
CITY-S1-ZIP DELETE 3.1 III.LE Change Addition	NAME	22N		2.2 NAME				
DELETE	STREET ADDRESS	2.3 \$		2.3 STREET ADD	DRESS			
NAME	CITY-ST-ZIP			2. 4 CHTY- S1 - 2	7tP			
STREET ADDRESS 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 3.4 CITY-ST-ZIP 3.4 CITY-ST-ZIP 3.4 CITY-ST-ZIP 3.4 CITY-ST-ZIP 3.5 STREET ADDRESS 4.7 NAME 5.7	TITLE	DELETE 3.11		3.1 TITLE			Change Addition	
STREET ADDRESS STRE	NAME	32 N		3.2 NAME				
DELETE	STREET ADDRESS	3.3.5		3.3 STREET ADD	DRESS			
NAME	CITY-ST-ZIP			3.4. CITY-ST-2	P.P			
NAME	TITLE	DELETE 4.1 T		4.1 TITLE			Change Addition	
NAME	NAME			4. 2 NAME		01		
NAME	STREET ADDRESS			4.3 STREET ADD	DRESS			
NAME	CITY-ST-ZIP			4.4 CHY-SI-7	IP.	(, , 0	7-1	
NAME	TIPLE		DELETE	5.1 TITLE		101	Change Addition	
CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE DELETE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP	NAME			5.2 NAME		7	1	
TITLE DELETE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP	STREET ADDRESS			5.3 STREET ADD	DRESS			
TITLE DELETE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP	CITY-ST-ZIP			5.4 CHTY-ST-Z	P		ļ	
STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP							☐ Change ☐ Addition	
CITY-ST-ZIP 6.4 CITY-S1-ZIP	NAME			6.2 NAME				
CITY-ST-ZIP 6.4 CITY-S1-ZIP	STREET ADDRESS			6.3 STREET ADD	DRESS			
	: I							
information indicated on this appual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under path; that I	14. I do heret	by certify that the information supplied w	ith this filing does not qualify	for the exemp	tion stated i	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 18 if changed, or on an effective that the state of the corporation of the corporation or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 18 if changed, or on an effective that the state of the corporation of the corporation of the corporation or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 18 if changed, or on an effective that the corporation of the co

. They Colore