

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

FILED  
Mar 14 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # P96000038101 (7)

1. Corporation Name

ALL THAT GLITTERS OF S.W. FLORIDA, INC.

Principal Place of Business

Mailing Address

3402 SE 5TH AVE  
CAPE CORAL FL 33904

3402 SE 5TH AVE  
CAPE CORAL FL 33904-4923



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified		3a. Date of Last Report	
21 14661 EAGLES LOOKOUT CT.		26 14661 EAGLES LOOKOUT CT.		04/24/1996			
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.		4. FEI Number		Applied For	
				65-0675990		Not Applicable	
23 City & State		28 City & State		5. Certificate of Status Desired		8.75 Additional Fee Required	
23 FORT MYERS, FL		28 FORT MYERS, FL		<input type="checkbox"/>		5.00 May Be Added to Fees	
24 Zip		29 Zip		6. Election Campaign Financing Trust Fund Contribution		<input type="checkbox"/>	
24 33912		29 33912		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
25 Country		30 Country		10. Name and Address of New Registered Agent			
25 LEE		30 LEE					
9. Name and Address of Current Registered Agent				81 Name			
MILLER, ROBERT				ROBERT MILLER			
3402 SE 5TH AVE				82 Street Address (P.O. Box Number is Not Acceptable)			
CAPE CORAL FL 33904				14661 EAGLES LOOKOUT COURT			
				83			
				84 City			
				FORT MYERS			
				FL			
				85 Zip Code			
				33912			

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

*Robert Miller*

ROBERT MILLER, PRESIDENT

(Signature, typed or printed name of registered agent and title, if applicable)

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	D/P/S/T
NAME	MILLER, ROBERT	1.2 NAME	MILLER, ROBERT
STREET ADDRESS	3402 SE 5TH AVE	1.3 STREET ADDRESS	14661 EAGLES LOOKOUT COURT
CITY-ST-ZIP	CAPE CORAL FL 33904	1.4 CITY-ST-ZIP	FORT MYERS, FL 33912
TITLE		2.1 TITLE	
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE		3.1 TITLE	
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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:

*Robert Miller*

ROBERT MILLER

(941) 561-5610

CR2E034 (9/96)