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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P96000042514 (5)

ACHIEVE PROFITS, INC.

Principal Place of Business 10932 NORTH DANBURY WAY BOCA RATON FL 33498							
					3. Date Incorporated or Qualified 3a. D	ate of Last R	leport
Principal Place of Business 1	2a. Mading Address 26				4. FEI Number -06/ 9298		pplied For
Suite, Apt. #, etc.	Suite, Apt. #, etc				5. Certificate of Status Desired	\$8.75	Additional equired
Crty & State	City & State	***************************************		100	Election Campaign Financing Trust Fund Contribution		May Be to Fees
Zip Cc [24] [25]	29 Zip	30 Cour	ntry	· · · · · · · · · · · · · · · · · · ·	8. This corporation has liability for intangible Florida Statutes		; 199.032,
9, Name and A	ddress of Current Registered Agent			T	10. Name and Address of New Registered	Agent	
ELSNER, GARY H	NIDV MAV		B1	Name			
10932 NORTH DANE BOCA RATON FL 33			62	Street Addre	ess (P.O. Box Number is Not Acceptable)		
			83				
		•	84	City	FI	85 Zip	Code
11. Pursuant to the prevision of office of registered agont. A agent I am semil at with a strong SiGNATURE Signer at the foliage of the strong signer at the foliage of the strong signer at the stron	Sections 607.9502 and 607.1508, Florida S both of the Style of Florida. Such change accept the original style of Section 607.050 halfor originals. Lagon and the Happinsale.				oration submits this statement for the purpose ion's board of directors. I hereby accept the ap	of changing is pointment as	ts registered registered
12.	OFFICERS AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTOF	RS IN 12
TITLE	DELET	11111	ιE		++++++++++++++++++++++++++++++++++++++	Change	Addit:on
NAME (-May	1. ELsven President	1.2 NA	ME				
STREET ADDRESS		1.3 \$11	REET	ADORESS			
	1/105/11-605	1.4 CIT		ST-ZIP			
TITLE	☐ DELET					Change	Addition
NAME		2.2 NA					
STREET ADDRESS				ADDRESS			
TORE ST ZIE	DELET	2 4 CI 3.1 TIT		S1 - ZIP		Change	Addition
NSM:	better	3.2 NA				0go	
STREET ACDRESS				ADDRESS			
City-S* 7iP		3.4. CI					
TIPLE	DELETI				/- F	Change	Addition
N4M:		4. 2 NA	ME				
STREET ACCUREDS		4.3 ST	REET	ADDRESS			
C1(Y-S1-ZiP		4.4 CI1	Y-S	ST-ZIP			
HILE	DELET	5.1 (1)	LE			Change	Addition
N4ME		5.2 NA	ME				

14. Ldb 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 appear with an address.

6.1 T(TLE

6.2 NAME

5.3 STREET ADDRESS 5.4 CITY - ST - ZIP

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

SIGNATURE:

STREET ACCESS

STHEET ACTURE AS

0!!Y+\$1-7P

CITY-S - 702

TELF

NAME

DELETE

Change

Addition

FILED

Mar 20 1997 8:00am

Secretary of State