PROFIT CORPORATION ANNUAL REPORT 1997 CUMENT # P96000044229 (8) EDGE FINANCIAL SERVICES, INC.	Mortham of State		997 8:0	0.0 m	
ANNUAL REPORT 1997 CUMENT # P96000044229 (8)	of State		Apr 29 1997 8:00am		
1997 Division of contraction CUMENT # P96000044229 (8)		Secrets	ary of St		
				lat	
EUGE MINANUAL BERVICED, INC.					
At Place of Business Mailing Address	-		nti matte Nimit andın nımık hatı	8 1811 J881	
ORTH PINE ISLAND ROAD 1826 NORTH PINE ISLAND ATION FL 33322 PLANTATION FL 33322-5202					
		 Date Incorporated or Qualified 05/23/1996 	3a. Date of Last R	eport	
cipal Place of Business 28. Mailing Address		4. FEI Number		oplied For	
e, Apt. #, etc		6 50 66 70 46		ot Applicable Additional	
27 27 City & State		5. Certificate of Status Desired	Fee Re	beriupe	
28	·····	6. Election Campaign Financing Trust Fund Contribution		May Be to Fees	
Country Zip 25 29	Country 30	 This corporation has liability fo Florida Statutes 	r intangible tax under s 🗙 Yes 🔲 No	199.032,	
9. Name and Address of Current Registered Agent EISENBERG, WILLIAM H	81 Name	10. Name and Address of New F	egistered Agent		
1826 NORTH PINE ISLAND ROAD 82 Street Addre		Address (P.O. Box Number is Not Accepta	abie)		
PLANTATION FL 33322	63		·····		
	84 City		85 Zip	Code	
ursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statute lice or registered agent, or both, in the State of Florida, Such change was a	s, the above-name	corporation submits this statement for the	FL Purpose of changing I	ts registered	
lice or registered agent, or both, in the State of Florida. Such change was an ent. I am familiar with, and accept the obligations of, Section 607,0505, Florence and the section for the sec	uthorized by the co rida Statutes.	poration's board of directors. I hereby acc	ept the appointment as	registered	
		e required when reinstating)	DATE		
OFFICERS AND DIRECTORS	13. 1.1 TALE	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTOR	Addition	
	1.2 NAME	William Eischberg	<u>^</u>		
2004555 - 210	1.3 STREET ADDRESS 1.4 City - St - Zip	8651 Batchouse Road Richtation, FL 3000	.ч У	Addition	
	2.1 TITLE		Change	Addition	
NORESS	2.2 NAME 2.3 STREET ADDRESS				
7/P	2. 4 CITY - ST - ZIP		Change	Addition	
	3.1 TITLE 3.2 NAME				
0DRESS	3 3 STREET ADDRESS				
	3.4. CITY - ST- ZIP 4.1 TITLE	· · · · · · · · · · · · · · · · · · ·	Change	Addition	
	4. 2 NAME				
009655 -71P	4.3 STREET ADDRESS 4.4 City-St-Zip				
DELETE	5 1 TITLE	· · · · · · · · · · · · · · · · · · ·	Change	Addition	
ID/DEC 22	5.2 NAME 5.3 STREET ADDRESS			ļ	
ADDRESS	5.4 CITY - ST - ZIP				
	6.1 TIFLE		Change	Addition	
ADDHESS	6.2 NAME 6.3 STREET ADDRESS				
- 716	6.4 CITY-ST-ZIP		100 1 6 10		
io hereby carity that the information supplied with this filing does not qualify formation indicated on this annual report or supplemental annual report is tr an an afflicer or director of the corporation or the receiver or trustee empower	y for the exemption ue and accurate an ared to execute this	stated in Section 119.07(3)(i), Florida Statu d that my signature shall have the same le- report as required by Chapter 607. Florida	tes, i turther certify that gal effect as if made un Statutes: and that mu	une Ider oath; that	
apears in Block 12 or Block 13 in hanged come altachment with an add	ress.		eleteneo, and pipe filly		
NATURE:		4/22/97	954- 473-	.9442	