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

CORPORATION ANNUAL REPORT

1997

A STATE OF THE STA



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # P9600050109 (3)

P& L SURVEYORS, INC

FILED Mar 13 1997 8:00 am Secretary of State



Principal Place of Business		Mailing Ad	Mailing Addross 4700 SHERIDAN STREET BLDG 1								
		4700 SHERI									
HOLLYWOOD I	FL 83021	HOLLYWOO	D FL 33021-3410	3							
						3. Date Incorpora 06/12/1996	ed or Qualified	3a. Date o	of Last R	eport	
2. Principal P	Place of Business	2a. Mailing	Address			4. FEI Number			TAr	plied For	
21 Suite Ant	·	26	26				0675°	739		t Applicable	
" Suite, Whi	#, etc.	Suite, A	Suite, Apt. #, etc.					ø		Additional	
22		27				5. Certificate of St	atus Desired			quired	
City & State	е	City & S	State		,	6. Election Campa	ign Financing	- '	\$5.00	May Be	
23		28				Trust Fund Con			Added		
23 Zip 24	Country	Zip		Country	4	8. This corporation	nhas liability for i	ntangible tax	under s	199.032,	
24	25	[29]	1:	30	· · · · · · · · · · · · · · · · · · ·	Florida Statutes		Yes N			
	9. Name and Address of Curi	rent Hegistered Ag	ent		T	10. Name and Add	ress of New Re	gistered Age	nt		
	SSETT, ROBERT L			81	Name						
) sheridan street blog i Lywood FL 33021			82	Street Add	dress (P.O. Box Number	is Not Acceptab	le)			
	· C			83							
\$1.00 \$1.00				84	City			1	1 70.7	Pode	
1 44 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4					- '	•		FL 8	1		
11. Pursuant I	to the provisions of Sections 607.0 epilstered agont, or both, in the State familiar with, and accept the object.	502 and 607.1508, ite of Florida. Such	Florida Statutes change was au	the abov	e-named cor y the corpora	rporation submits this station's board of directors	atement for the pi	urpose of cha	inging it ment as	s registered registered	
SIGNATURE	,	ilgations of, section	007.0305, MON	ida Siaidie	S.						
.12.	Stynature, typed or printed name of registered. DEFICE DS A	IND DIRECTORS	(NOTE:		ent signature requ	uired when reinstating)	1050 70 0550	DATE			
TITLE	D. OFFICENS A		DELETE	13.		ADDITIONS/CHA	NGES TO OFFIC				
NAME	GOSSETT, ROBERT L		DECEM					Ц	Change	Addition	
STREET ADDRESS	4700 SHERIDAN STREET BL	DG I		1.2 NAME							
CITY-ST-ZIP	HOLLYWOOD FL 33021			1.3 STREET							
TITLE	D		DELETE	1.4 CHY- S	11 - 71P	:	······································				
NAME	GOSSETT, RONALD P	Ļ	_ OCTENE	2.1 TITLE				LJ	Change	Addition	
	4700 SHERIDAN STREET BL	DG I		22 NAME							
STREET ADDRESS	HOLLYWOOD FL 33021	DG 1		2.3 STREFT	ADDRESS						
OTTY-ST-ZIP	HOLETHOOD I LOUGI		1 DELETE	2.4 CITY-5	ST- Z IP					_	
		L] DELETE	3.1 TITLE			•	. LJ	Change	Addition	
	*. \\$			3.2 NAME							
REET ADORESS CITY-ST-ZIP				3.3 STREET							
			Tours	3.4. CITY - 5	ST-ZIP	······································					
TITLE		L	DELETE	4.1 TITLE					Change	Addition	
NAME				4. 2 NAME							
STREET ADDRESS				4.3 STREET							
CITY-ST-ZIP			T BOURS	4.4 CHY-S	I - ZiP						
TITLE		L	_ DELETE	5.1 TITLE		•			Change	Addition	
NAME				5.2 NAME							
STREET ADDRESS				5.3 STREE1	ADDRESS	:					
CITY-ST-ZIP				5.4 CITY - S	1 - 21P				_		
TITLE	•		DELETE	6.1 TITLE					Change	Addition	
NAME				6.2 NAME		•					
STREET ADDRESS				6.3 STREET	ADDRESS						
CITY-ST-ZIP				6.4 CHY-S	1 - 7iP						
de la basela		. 1 241 2 221									

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 sm an officer or director of the corporation or the receiver extrustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if change); or on an attachment with an address.