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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000051730 (5)

FILED May 21 1997 8:00am Secretary of State

Principal Place of Business Mailing Address 940 S.W. 17TH STREET 900 S.W. 17TH STREET 900 S.W. 17TH STREET 900 S.W. 17TH STREET 900 S.W. 17TH STREET						
BOCA RATON FL 33486 BOCA RATON FL 33486-56				3. Date Incorporated or Qualified 06/18/1996	3a. Date of La	ist Report
2. Frincipal Place of Business	2a. Mailing Address	s		4. FEI Number	<u> </u>	Applied For
21	26					Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.		C.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	City & State		······································	6. Election Campaign Financing		00 May Be
23	28			Trust Fund Contribution		ded to Fees
Zip Country	Zip	Cou	intry	8. This corporation has liability for		er s. 199.032,
24 25	29	30	T	Florida Statutes 10. Name and Address of New Ro	Yes No	
9. Name and Address of Cur	Tent Registered Agent		81 Name	10, Name and Address of New H	-Bistelen Wäellr	
SMITH, NIGEL R. R						
940 S.W. 17TH STREET POCA RATON FL 33488		1	Street Address (P.O. Box Number is Not Acceptable)			
TOTAL INTO INTERPORT			83			
		i	100	<u> </u>	11	7:- 0-1-
		İ	84 City		FL 85	Zip Code
office or registered agent, or both, in the St agent I am familiar with, and accept the ob- SIGNATURE Stgnarus, typed or printed name of registered	d agent and little if applicable			a required when reinstating)	DATE	
	AND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFI		
TILE PD	☐ DETE			P/D/S/T	Chai	nge Addition
NAME SMITH, NIGEL'R. 'R STREET ADDRESS 940 S.W. 17TH STREET		1.2 N/		SMITH, NIGEL R. R 940 S.W. 17th Str		
STREET ATORESS 940 S.W. 171H STHEET 80CA RATON FL 33486		1	TREET ADORESS	1	eet	
TITLE LSTD		1.9 0	111.01.5H	I BAAS DSEAS DT 3		
NAME -MEYER, DAVID L	X DELE	TE 2.1 TI		Boca Raton, FL 3		nge Addition
	X DELE	TE 2.1 TI 2.2 N	ITLE	Boca Raton, FL 3	3486	nge Addition
STREET ADDRESS - 940 S.W. 17TH STREET	X DELE	2.2 N	ITLE	Boca Raton, FL 3	3486	nge Addition
STREET ADDRESS - 940 S.W17TH STREET- CITY-SI-ZIP - 900A-RATON FL-G3486 -	(XX) DELE	2.2 N 2.3 \$1	ITLE AME	Boca Raton, FL 3	3486	nge 🔲 Addition
DOOL DATON EL BOARD	[] DELE	2.2 N 2.3 SI 2. 4 C	itle Ame Treet address City-St-Zip	Boca Raton, FL 3	3486	
CITY ST-ZIP BOCA RATON FL-03466 -		2.2 N 2.3 SI 2. 4 C	itle Ame Treet address City-St-Zip Itle	Boca Raton, FL 3	3486 Chai	
DILE BOCA PATON FL-33486 —		2.2 N/ 2.3 SI 2.4 C TE 3.1 TI 3.2 N/	itle Ame Treet address City-St-Zip Itle	Boca Raton, FL 3	3486 Chai	
CITY-SI-ZIP BOCA RATON FL-33486 — TITLE NAME STREET ADDRESS CITY-S1-ZIP	□ DEL€	22 No 23 Si 2. 4 C TE 3.1 Tr 32 No 33 Si 3.4. C	ITLE AME TREET ADDRESS CITY-ST-ZIP FILE AME TREET ADDRESS CITY-ST-ZIP	Boca Raton, FL 3	3486 ☐ Chai	nge Addition
CITY: ST-ZIP TITLE NAME STREET ADDRESS CITY: ST-ZIP TITLE		22 NV 23 SI 2. 4 C 3.1 Tr 32 N 33 SI 3.4 C	ITLE AME TREET ADDRESS ITY-ST-ZIP ITLE AME TREET ADDRESS CITY-ST-ZIP ITLE	Boca Raton, FL 3	3486 Chai	nge Addition
CITY-ST-ZIP TOLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	□ DEL€	22 NV 23 SI 2. 4 C 3.1 Tr 32 N 33 SI 3.4 C TE 4.1 Ti 4.2 N	ITLE AME TREET ADDRESS TITY-ST-ZIP TREET ADDRESS TREET ADDRESS CITY-ST-ZIP TITLE VAME	Boca Raton, FL 3	3486 ☐ Chai	nge Addition
CHY-SI-ZIP TOLE NAME STREEL ADDRESS CHY-S1-ZIP TITLE NAME STREEL ADDRESS STREEL ADDRESS	□ DEL€	22 NV 23 SI 2. 4 C 3.1 TF 32 NV 33 SI 34 C TE 4.1 TI 4.2 NV 4.3 S'	ITLE AME TREET ADDRESS CITY-ST-ZIP ITLE TREET ADDRESS CITY-ST-ZIP TILE VAME STREET ADDRESS	Boca Raton, FL 3	3486 ☐ Chai	nge Addition
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CHY-SI-ZIP TITLE NAME STREET ADDRESS	[_] DELE	22 N/ 23 SI 2. 4 C 3.1 Tr 32 N/ 33 SI 3.4 C TE 4.1 Tr 4.2 N/ 4.3 S' 4.4 C 5.1 Tr 52 N/ 53 S	ITLE AME TREET ADDRESS CITY-ST-ZIP ITLE IAME TREET ADDRESS ITLY-ST-ZIP ITLE VAME STREET ADDRESS CITY-ST-ZIP ITLE ITLE ITLE ITLE IAME ITLE IAME		3486	nge Addition
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CHY-SI-ZIP TITLE NAME STREET ADDRESS CHY-SI-ZIP TITLE	[_] DELE	22 N/ 23 SI 2. 4 C 3.1 TF 32 N/ 33 SI 34 C TE 4.1 TI 4.2 N/ 4.3 S' 4.4 C 5.1 TI 52 N/ 53 S 54 C	ITLE JAME		3486	nge Addition
CITY-ST-ZIP TITLE HAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME NAME NAME NAME NAME NAM	DELE	22 NV 23 SI 24 CC 3.1 TF 32 NV 33 SI 34 CC 4.1 TF 4.2 NV 4.3 SI 4.4 CC 5.1 TI 52 NV 5.3 SI 5.4 CC 6.1 TF 6.2 NV 6.2 NV 6.3 SI 5.4 CC 6.1 TF 6.2 NV 6.3 SI 5.4 CC NV 6.3 SI 6.3	ITLE AME ITREET ADDRESS CITY-ST-ZIP ITLE ITREET ADDRESS CITY-ST-ZIP ITLE ITREET ADDRESS CITY-ST-ZIP ITLE IAME ITREET ADDRESS CITY-ST-ZIP ITLE IAME ITREET ADDRESS CITY-ST-ZIP ITLE IAME		34.86	nge Addition
CHY-SI-ZIP TRLE NAME STREET ADDRESS CHY-SI-ZIP TITLE	DELE	22 NV 23 SI 2. 4 C 3.1 TF 32 N. 33 SI 3.4 C 4.1 TF 4.2 N 4.3 S 4.4 C 5.1 TF 5.2 N 5.3 S 5.4 C 6.1 TF 6.2 N 6.3 S	ITLE JAME		34.86	nge Addition

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 off-per or director of the corporation or the receiver or trustee empowered to execute this report as regulred by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if manger or on an attachment with an address. I am an officer or director of the corrappears in Block 12 or Block 13 if

NIGHT RORLEMITH

(561) 347-3700