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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Apr 25 1997 8:00am Secretary of State

DOCUMENT # P96000067592 (1) BEYOND REACH, INC. Principal Place of Business Mailing Address 111 NORTH ORANGE AVENUE 111 NORTH ORANGE AVENUE **SUITE 1300 SUITE 1300** ORLANDO FL 32801 ORLANDO FL 32801-2387 3. Date Incorporated or Qualified 3a. Date of Last Report 08/14/1996 2. Principal Place of Business 2a. Mailing Address Applied For 59-3438570 21 Not Applicable Suite, Apt #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Country Zip Country 8. This corporation has liability for intangible tax under s. 199.032, 24 Florida Statutes Yes No 25 30 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent Name INTRASTATE REGISTERED AGENT CORPORATION 701 BRICKELL AVENUE R2 Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 33131 83 City Zip Code and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered of Florida. Such change was authorized by the corporation's board of directors. We reby accept the appointment as registered top of section 607.0505, Florida Statutes. office or registered agent, or agent. I am familiar with, and Signature, typed or (NOTE Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTOR 13. (96/6)DELETE 1.1 TITLE Change 1019.1 NAME COX, JOHN 1.2 NAME 111 NORTH ORANGE AVENUE, SUITE 1300 1.3 STREET ADDRESS STREET ADDRESS ORLANDO FL 32801 City - St--ZiP 1.4 CITY-ST-ZIP DELETE Change Addition TIFLE 2.1 TITLE NAME 2.2 NAME 2.3 STREET ADDRESS STREET ADDRESS 2. 4 CITY - ST - ZIP CITY - ST - 21F DELETE Change Addition 31 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADORESS 011Y-\$1-2iF 3.4. CITY-ST-ZIP DELETE Addition Change 4.1 TITLE THIE 4. 2 NAME NAME STREET ADDRESS 4.3 STREET ADDRESS 44 CITY-ST-ZIP CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME STREET ACCHESS .5.3 STREET ADDRESS CITY-\$1-ZIP 5.4 CITY-\$1-ZIP DELETE 6.1 TITLE Change Addition THE 6.2 NAME NAME

14. I do nereby 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 about 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 every purple empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name I am an officer or director of the corporation or to appears in Block 12 or Block 13 if changed, or or

63 STREET ADDRESS

6.4 CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS CITY - \$1 - 70P

SIGNATURE AND TYPED OF