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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Aug 07 1997 8:00am

Secretary of State

30 C 8121 - 001-B

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000070610 (6)

TAYLEX GROUP, INC.

、江海山でも1915年 (構造社会 400m) (After County Text and 400 m) (Month County Text And						
Principal Place of Business 10099 N.W. 89TH AVENUE BAY #4 MEDLEY FL 33178		Mailing Address 10099 N.W. 89TH AVENUE BAY #4 MEDLEY FL 33178-1421			BB III (DBIT) OBIND BAIDI TABAT BOAN ADBA	
MEDERITE		WESTER 12 35113 1121		3. Date Incorporated or Qualified 08/21/1996	3a. Date of Last Report	
· '	lace of Business	2a. Mailing Address		4. FEI Number	Applied For	
21		26		65-0702260	Not Applicable	
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
22		27		o, continuate of clares because	Fee Required	
City & State	9	City & State		6. Election Campaign Financing	\$5.00 May Be	
23	Country	28	Country	Trust Fund Contribution	Added to Fees	
Zip 24	Country	Zip 3	¬ ´	8. This corporation has liability for in Florida Statutes	ntangible tax under s. 199.032, I Yes No	
24	25 9. Name and Address of Curren		so[10. Name and Address of New Rec		
SIUS	TSKY, STUART M ESQ.	· · · · · · · · · · · · · · · · · · ·	81 Name			
EE MEGTON DOAD				JOHNS E. MUIPHY		
SUITE 304			82 Street A	Address (P.O. Box Number is Not Accliptable 1999)		
FORT LAUDERDALE FL 33326				10011 7000 61 12 7-101		
		_	84 City	MEDIEY	FL 85 Zip Code 23(78	
11. Pursuant	to the provisions of Sections 602,050:	2 and 607.1508, Florida Statutes	the above-named	corporation submits this statement for the pu	urpose of changing its registered	
office or re	egiste ed agent, or both in the Sale or tamilar with, and accept the obliga	of Florida, Sugh change was au stions of Section 607 0505, Flori	thorized by the corp da Statutes	corporation subtrits this statement for the purporation's board of directors. I hereby accept	t the appointment as registered	
1	1 June		the characters.			
SIGNATURE	Signature, 17% dier printed name of registered age	nt and title it applicable (NOTE:	Registered Agent signature	required when reinstating)	30-97	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICE		
TITLE	Trestoret	DELETE	1.1 TITLE	72850825	Change Addition	
NAME	LOU! MUTHY		1.2 NAME	JOHN E. MUMY		
STREET ADDRESS			1.3 STHEFT ADDRESS	16801 HAIBOL CT.		
CITY-ST-ZIP	FT. LAUDELDALE, FL.	33356	1.4 CITY - ST - ZIP	witton, FL. 33326		
TITLE	Secretary	DELETE	2.1 TITLE	JECTEMAN/	Change Addition	
NAME	LOUIS TROUBUS 101		2.2 NAME	JOHN E. MUPHY		
STREET ADDRESS	16645 KEDWOOD TO	7	2.3 STREET ADDRESS	16801 HARBON CT.		
CITY-ST-ZIP	Fi. LAUDELOALE, FI.	DELETE	2 4 C(1)Y-S1-Z(P	WESTON, FL. 33326	Charte Middling	
TITLE			31 TITLE		L Change: L Addition	
NAME			3.2 NAME			
STREET ADDRESS			3.3 STREET ADDRESS			
CITY-ST-ZIP TITLE		DELETE	3.4. C(1Y - ST - 7)P 4.1 Tifle		Change Addition	
NAME		Laiperet	4. 2 NAME		E onenge E vocation	
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY - ST - ZIP			
TITLE		DELETE	5,1 TITLE		☐ Change ☐ Addition	
NAME			5.2 NAME			
STREET ADDRESS		•	5.3 STREET ADDRESS			
CITY-ST-ZIP			5 4 CITY - ST - ZIP			
TITLE	· · · · · · · · · · · · · · · · · · ·	DELETE	61 TITLE		Change Addition	
NAME			6.2 NAME			
STREET ADDRESS			6 3 STREET ADDRESS			
CITY-ST-ZIP			6 4 City - S1 - ZIP			
14. I do hereb	by certify that the information supplied	with this filing does not qualify	for the exemption st	ated in Section 119.07(3)(i), Florida Statutes	. I further certify that the	
l am an of appears in	ifficer or director of the corporation or n Block 12 or Block 13 if changed, or	the receiver or truster employer on an attachment with an addre	e and accurate and red to execute this ri oss.	that my signature shall have the same legal eport as required by Chapter 607, Florida St	alutes; and that my name	