

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

FILED  
May 08 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Northam  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # P96000071673 (3)

1. Corporation Name  
GENALUR, INC.

Principal Place of Business  
367 ALHAMBRA CIRCLE  
CORAL GABLES FL 33134

Mailing Address  
367 ALHAMBRA CIRCLE  
CORAL GABLES FL 33134-5003

3. Date Incorporated or Qualified 08/28/1996  
3a. Date of Last Report

2. Principal Place of Business

21 1107 11 CT.

Suite, Apt. #, etc.

22

City & State

23 JUPITER, FLA.

Zip

24 33477

Country

25 USA

2a. Mailing Address

26 1107 11 CT

Suite, Apt. #, etc.

27

City & State

28 JUPITER, FLA

Zip

29 33477

Country

30 USA

4. FEI Number

65-0739053

☒ Applied For  
☐ Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

MILLER, EDGAR  
367 ALHAMBRA CIRCLE  
CORAL GABLES FL 33134

10. Name and Address of New Registered Agent

81 Name HELEN E. JAHN

82 Street Address (P.O. Box Number is Not Acceptable)

1107 11 CT

83

84 City JUPITER

FL

85 Zip Code

33477

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE *Helen E. Jahn*

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

4/11/97  
DATE

12. OFFICERS AND DIRECTORS

TITLE D  
NAME JAHN, HELEN  
STREET ADDRESS 1107 11TH COURT  
CITY - ST - ZIP JUPITER FL 33477

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

☐ DELETE

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PRESIDENT, D  
1.2 NAME JAHN  
1.3 STREET ADDRESS  
1.4 CITY - ST - ZIP

☐ Change ☒ Addition

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY - ST - ZIP

☐ Change ☒ Addition

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY - ST - ZIP

☐ Change ☐ Addition

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY - ST - ZIP

☐ Change ☐ Addition

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY - ST - ZIP

☐ Change ☐ Addition

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY - ST - ZIP

☐ Change ☐ Addition

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

SIGNATURE: *Helen E. Jahn*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/11/97 (561)622-7564

Date

Daytime Phone #

0170002

CR2E034 (9/96)