

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

FILED

Apr 30 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # P96000075716 (6)

1. Corporation Name  
CELIN, INC.



Principal Place of Business  
400 S DIXIE HIGHWAY  
SUITE 128  
BOCA RATON FL 33432

Mailing Address  
400 S DIXIE HIGHWAY  
SUITE 128  
BOCA RATON FL 33432-6023

3. Date Incorporated or Qualified  
09/09/1996

3a. Date of Last Report

2. Principal Place of Business  
21 3310 W Hillsboro Blvd.

2a. Mailing Address  
26 3310 W Hillsboro Blvd.

4. FEI Number  
65-0703446

Applied For  
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

22 City & State  
23 Deerfield Beach, Florida

27 City & State  
28 Deerfield Beach, Florida

6. Election Campaign Financing  
Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

24 Zip  
33442

25 Country  
U.S.A.

29 Zip  
33442

30 Country  
U.S.A.

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DICKSON, LAWRENCE A  
400 S DIXIE HIGHWAY  
SUITE 128  
BOCA RATON FL 33432

81 Name  
Anthony J. Reitano, P.A.  
82 Street Address (P.O. Box Number is Not Acceptable)  
3310 West Hillsboro Boulevard  
83  
84 City  
Deerfield Beach FL 85 Zip Code  
33442

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 *Anthony J. Reitano, P.A.* Anthony J. Reitano, P.A. January 8, 1997  
Signature, typed or printed name of registered agent and title, if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PVD	<input type="checkbox"/> DELETE
NAME	LINDSTROM, CARLERIC	
STREET ADDRESS	18, AVENUE GRAND-DUC-JEAN	
CITY-ST-ZIP	L-1842 HOWALD, LUXENBOURG	
TITLE	STD	<input type="checkbox"/> DELETE
NAME	BLOMQUIST, INGELA B	
STREET ADDRESS	18, AVENUE GRAND-DUC-JEAN	
CITY-ST-ZIP	L-1842 HOWALD, LUXENBOURG	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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.

CR2E034 (9/96)