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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # P96000076677 (9)

ELECTRONIC RAPID RETURNS INC.

Principal Place of Business	Mailing Address
109 BANYAN LANE ROYAL PALM BEACH FL 33411	109 BANYAN LANE ROYAL PALM BEACH FL 33411-8682

FILED May 30 1997 8:00am Secretary of State



						3. Date incorporated or Qualified 3a. Date of Last Report 09/13/1996		
2. Principal P	lace of Business	2a. Mailing Addre	SS			4. FEI Number Applied For		
26					65-0702881 Not Applicable			
Suite, Apt	#, etc.	Suite Apt. #, e	etc.			SB.75 Additional		
22		27				5. Certificate of Status Desired Fee Required		
City & State	e	City & State				6. Election Campaign Financing \$5.00 May Be		
23		28				Trust Fund Contribution Added to Fees		
Zip	Country	Z _i p	Cou	Country		8. This corporation has liability for intangible tax under s. 199.032,		
24 25 29 30			Florida Statutes Yes No					
	9. Name and Address of Cu	irrent Registered Agent			<u></u>	10. Name and Address of New Registered Agent		
	tzik, susan k			B1	Name			
	Banyan Lane			82 Street Address (P.O. Box Number is Not Acceptable)				
ROY	YAL PALM BEACH FL 33411							
				83				
				84	City	85 Zip Code		
					·	FL []		
11. Pursuant	to the provisions of Sections 607	.0502 and 607.1508, Florid	a Statules, the a	bove	-named c	d corporation submits this statement for the purpose of changing its registered		
office or r agent I a	registored agent, or boln, in the s im famil ar with, and accept the c	State of Florida. Such chang obligations of, Section 607.0	je was aumonze 1505, Florida Sta	tytes	the corps	rporation's board of directors. I hereby accept the appointment as registered		
SIGNATURE			LUMAN	V.	. Ka	4itzi M 5.23-91		
SIGNATURE	Signature, typical or printed name of register	ed agent and little if applicable	INOTE Registers	d Age	nt signature r	re required when reinstating) DATE		
12.	OFFICERS	S AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE		☐ DEL	.ETE 1.1 T	ITLE		President Change Addition		
NAME			1.2 N	AME		Susan K. Kritzik		
STREET AFFIRESS			1.3 S	TREET	ADDRESS	Royal Palm Boh, F1 33411		
COLY-ST-ZIF					T-ZIP	Rosal Palm Bon, F1 33411		
TITLE		DELETE 21T		ITLE	ł	Change Addition		
NAME			22 N	AME				
STREET ADORESS			238	TREET	ADDRESS			
CITY-ST-2II*			2.41	CITY - S	ST-ZIP			
TITLE		☐ DE	ET€ 31T	ITLE		Change Additio		
NAME			32 N	IAME				
STREET ADDRESS			335	TREET	ADDRESS			
CHTM-ST-ZIP				CITY-5	ST-ZIP			
THILE		☐ DEI	.ETE 4.1 T	ITLE	j	☐ Change ☐ Additio		
NAME			4.21	NAME				
STREET AODRESS			4.3 \$	TREET	ADDRESS	·		
CITY - ST - 7IP				ITY-S	T- ZIP			
11176		☐ D£i	.ETE 5.1 T	ITLE		☐ Change ☐ Additio		
NAME			5.2 N	IAME				
STREET ADDRESS			5.3 9	TREET	ADDRESS			
CHY-\$1-20P	}		5.4 (aty-s	T-21P			
11118	Table State Control of the Control o	DE		$\overline{}$		☐ Change ☐ Additio		
NAME			6.2 N	IAME	ļ			
STREET ADDRESS			6.3 \$	TAEET	ADDRESS			
C(TY+ST+7IP			6.4 (ITY-S	T-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.

SIGNATURE:

TURE AND TYPED ON PRINTED NAME OF SIGNED OFFICE OR DIRECTOR

523-97 561-153-1364