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 CGRPORATIONS

DOCUMENT # P96000078834 (4)

MCKENDALL GROUP, INC.

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97 JUN 20 1 7: 16 h

SECRETARY OF STATE TALLAHASSEE FLORIDA



Principal Place of Business Mailing Address						I IDDIIDALI IIA JAIIN OYIN OBNIL ODNIL ORIN ORIS 10001 Ibidi Louan Filit Dian Ida		
2455 EAST SUNRISE BLVD. SUITE 303 - INTERNATIONAL BLDG. FORT LAUDERDALE FL 33304 2455 EAST SUNRISE BLVD. SUITE 303 - INTERNATIONAL BLDG. FORT LAUDERDALE FL 33304 FORT LAUDERDALE FL 33304				NAL BLDG	,			
							3. Date Incorporated or Qualified 3a. Date of Last Report 09/20/1996	
2. Principal Place of Business			2a. Mailing Address 26				4. FEI Number Applied For Not Applied For	
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional Fee Required	
City & State			City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
Zip 24	Country 25	29	Zip	30 Cou	ntry	,	8. This corporation has liability for inlangible tax under s. 199.032, Florida Statutes Over No No	
	9, Name and Address of Current		stered Agent	1241			10. Name and Address of New Registered Agent	
HES	S, GEORGE F II				81	Name		
333 NORTH NEW RIVER DRIVE, EAST					82	Street Add	dress (P.O. Box Number is Not Acceptable)	
SUITE 2000 FORT LAUDERDALE FL 33301					83			
•					84	City	FL 85 Zip Code	
office or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State in familiar with, and accept the obliga	of Flori	rida. Such change was	authorized	d by	vithe corpora	rporation submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered	
GIGHATOTE	Signature typed or printed name of registered agor	nt and title	le if applicable. (NO	1E Registered	d Age	eni signature requ	uired when reinstating) DATE	
12.	OFFICERS AND	DIRE		13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D		DELETE	1.1 10	TLE		Change Addition	
NAME	Hess, george f II			1.2 N/	ME			
STREET ADDRESS	2455 EAST SUNRISE BLVD., S	UITE	2000	1.3 \$1	REET	ADDRESS		
CITY-ST-ZIP	FORT LAUDERDALE FL 33304			14 CI	1Y-S	ST-ZIP	1000022210214 -D6724797D10349mgeU13 Addition	
THLE	☐ DELETE 211		2111	ILE		-06/24/97010kManget115 Addition		
NAME				22 N/	AME		****165.00 ****165.00	
STREET ADDRESS				23 S1	HEET	ADDRESS		
CITY-ST-ZIP				2.40	пγ-9	ST-ZIP		
TITLE			☐ DEFELE	3 1 Tr	FLE		☐ Change ☐ Addition	
NAME				3.2 N/	AME			
STREET ADDRESS				3.3 S1	REET	ADDRESS		
CITY-ST-ZIP				3.4. C	ΠY-:	ST-ZIP		
TITLE			☐ DELETE	4.1 T/	TLE		☐ Change ☐ Addition	
NAME				4 2 N	AME	•		
STREET ADDRESS				4 3 S1	REFT	ADDRESS		
CITY-ST-ZIP				4.4 C	TY-S	ST - ZIP		
TITLE			☐ DELETE	5.1 TI	TLE		Change Addition	
NAME -				5.2 N	ME			
STREET ADDRESG				5.3 \$1	RÉET	ADDRESS		
CITY-ST-ZIP				5.4 CI	TY-S	ST - ZIP		
TITLE			DELETE	6.1 TI	TLE		Change Addition	
NAME				6.2 N	AME			
STREET ADDRESS				6.3 S1	REET	ADDRESS		
CITY-ST-ZIP						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 in flue and accurate and that my signature shall have the same legal effect as if made undegree 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 range appears in Block 12 or Block 13 if changed, or on an attachment with an address.

024/36/- 1900