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

P96000079547 (1) DOCUMENT #

FILED Jul 08 1997 8:00am Secretary of State

Principal Place of Business Principal Place of Business Principal Place of Business PLOGAN SQUARE V2220 PRILABELPHIA PA 19103 PRILABELPHIA PA 19103-2761											
							 Date Incorporated or QL 09/25/1996 	alified	3a. Date	of Last R	eport
2. Principal F	Place of Business	2a. Mailing Address	2a. Mailing Address				4. FEI Number	1		Ap	plied For
	Immokalee Road	26 2338 Immokalee Road				ad	65-0299876				ot Applicable
Suite, Apt		Suite. Apt. #, etc.				5. Certificate of Status Des	ired		\$8.75 / Fee Re	Additional	
City & Stat		City & State					6. Election Campaign Final	acing		\$5.00	
	es, FL	28 Naples, FL				Trust Fund Contribution	icing		Added t	•	
Zip	Country	Zip		untry	/		8. This corporation has liab	ility for int	tangible ta		
24 3394	2 25 USA	29 33942	30	ŲS	A		Florida Statutes		Yes 🛣		
	9. Name and Address of Current	Registered Agent		81	None		10. Name and Address of	New Regi	stered Ag	ent	
	NTOR, WARREN 38 IMMOKALEE ROAD #225			61	Name						
	PLES FL 33942			82	Street	Address	(P.O. Box Number is Not A	cceptable	;)		
183	LEO I C COOKE			83	· · · · · · · · · · · · · · · · · · ·						
									····	· · · · · · · · · · · · · · · · · · ·	
				84	Cily				FL	85 Zip (Code
SIGNATURE	to the provisions of Sections 607.0502 registered agent, or both, in the State of manifer with and accept the obligation of the state of the section of the sec	at and fire it applicable (N	IOIt: Registere	d Age			hen reinstating)		1314	(_/	
12.	OFFICERS AND	DELETE	13. 1.1 T			10	ADDITIONS/CHANGES T	J OFFICE		Change	Addition
NAME	KANTOR, WARREN			IAME		KATS	RINA CLOUSER				
STREET ADDRESS	2338 IMMOKALEE ROAD #225	5	1		ADDRESS	233	RINA CLOUSER 38 IMMOKALE	는 70	.,5017	E 22	5
CITY-ST-ZIP	NAPLES FL 33942		1.4 0	31Y-5	31 - 71P		PLES FL 33°		•		
TITLE		DELETE	21 T	TLE		T				Change	Addition
NAME			2.2 N	IAME		PAU	L KIRK B 1440KALEE	a 0	SWITE	27.5	
STREET ADDRESS			1								
CITY-ST-ZIP		☐ DELE1E	2. 4 (3.1 T		S1 - ZIP	NA	PLES FL 33	942		Change	Addition
TITLE .			3.11 3.2 N		ļ				_	_ Challyc	C Addition
STREET ADDRESS					ADDRESS						
CITY-ST-ZIP			1		ST-ZIP						
TITLE		DELETE	4.1 7							Change	Addition
NAME			4. 21	NAME							
STREET ADDRESS			4.3 S	TREET	ADDRESS						
CITY-ST-ZIP		——————————————————————————————————————			31-7IP	ļ				1 05-	4.100
TITLE		☐ DELETE	511		İ				L	Change	Addition
NAME			52 N		Abbecce						
STREET ADDRESS			1		ADDRESS						
CITY-ST-ZIP TITLE					T-ZIP	 			····	1 64	Addition
		I I DELETE	E 6 1 I	1111					,	Unanne	I HERMINI
NAME		DELE16	6.1 T 6.2 N		l				_	Change	Aggillon
NAME STREET ADDRESS		L_ DELETE	6.2 N	IAME	ADDRESS				L] Change	Addition
NAME STREET ADDRESS CITY-ST-ZIP		[_] DELETE	6.2 N 63 S	IAME Treet	ADDRESS] Change	Agoliun

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 eath; that I am an officer or director of the corporation or the receiver or trust to 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 eddress.

warrenkantor 7/3/97