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 CORPORATIONS

DOCUMENT # P96000079999 (4)

我就是我不知道是一个人,我们就是我们的一个人,我们就是一个人,我们就是一个人,我们就是我们的一个人,我们就是我们的一个人,我们就是我们的一个人,我们就会会一个人, 一个人,我们就是一个人,我们就是我们就是一个人,我们就是一个人,我们就是一个人,我们就是我们的一个人,我们就是我们的一个人,我们就是我们的一个人,我们就是我们的

DALY, IN	NC.					ļ		
Principal Plac	e of Business	Mailing Address						9 (8) (8)
710 N. OCEAN		710 N. OCEAN BLVD.						
#302		#302				· ·		
POMPANO BEA	ICH FL 33062	POMPANO BEACH FL \$3062-4601				3. Date Incorporated or Qualified 3a. D.	ate of Last F	Poporl
						09/25/1996 Sa. D.		ероп
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number Applied For		
21		26				65-0700445	N	ot Applicable
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		Additional
22 City & Stat	^	City & State						beriupe
23	8	28]				6. Election Campaign Financing Trust Fund Contribution	4	May Be to Fees
Zip	Country	Zip Country				8. This corporation has liability for intangible		·
24	25	F		•			No No	7. 100:00E,
	g. Name and Address of Current	Registered Agent				10. Name and Address of New Registered Agent		
DAL	Y, CHARLES],	B1	Name			
710 N. OCEAN BLVD.				82	Street Ac	ddress (P.O. Box Number is Not Acceptable)		
# 302								
POMPANO BEACH FL 33062			['	B3				
			ļ,	B4	City	-	85 Zip	Code
Description of Conference (O7.0100 and CO7.4500 Flands Oaklate						FL		lo registered
 Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the at office or registered agent, or both, in the State of Florida. Such change was authorized agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Stat 						ration's board of directors. I hereby accept the app	ointment as	registered
· 7	m tamiliar with, and accept the obligat	tions 01, Section 607.0505, Fig	onda Statu	los.	•			
SIGNATURE	Signature, typed or printed name of registered agen	at and title if applicable (NO1	E : Registered	Agor	ni signature re	guired when reinstating) DATE	····	
12. OFFICERS AND DIRECTORS			13.			ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	RS IN 12
TITLE			1.1 100	1.1 TITLE 1.2 NAME			Change	Addition
NAME	DALY, CHARLES							
STREET ADDRESS	710 N. OCEAN BLVD. #302			£1 <i>1</i>	ADDRESS			ļ
CITY-ST-ZIP	POMPANO BEACH FL 33062	PERET	1.4 CITY - S1 - ZIP		- 21F		D Obassa	T Addition
TITLE	DOLETE DOLETE			2.1 TOLE			Change	☐ Addition
NAME STREET ADDRESS	710 N. OCEAN BLVD. #302		2.2 NAME		ADDDE OD			
CITY-ST-ZIP	POMPANO BEACH FL 33062		2.3 STREET ADDRES 2.4 CHY+ST-ZP					
TITLE	TOM FATO DESCRIPTE GOODE	DELETE	3.1 111()		1-21		Change	Addition
NAME				3.2 NAME		•	·=· •	-
STREET ADDRESS					ADDRESS			
CITY-ST-ZIP			3.4. CI1	<u>Y - \$1</u>	I-ZIP			
TITLE	DELETE 4.11		4.1 T/TL	E	Ţ.		Change	Addition
NAME	4.2		4. 2 NA	ME	-			ļ
STREET ADDRESS	1		4.3 STR	EE1 /	ADDRESS			
CITY-ST-ZIP			4.4 CIT		-ZIP		T 1 &	
TITLE		DELETE	5.1 TITLE				L Change	Addition
NAME OTOSST ADODSSO	i I			5.2 NAME				
STREET ADDRESS			1	5.3 STREET ADDRESS 5.4 City-St-Zip				
CITY-ST-ZIP TITLE			54 CIT		- ZP		Change	Addition
NAME		other	62 NAM					tand - spanispil
STREET ADDRESS					ADDRESS			
			6.4 CiT					
				::				

I do hereby certify that the information supplied with this filling 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.

FILED

Apr 21 1997 8:00am

Secretary of State