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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE
Sandra B. M. vtham ,

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000080314 (3)

SVL GROUP, INC.

FILED
May 01 1997 8:00am
Secretary of State

Principal Place 2400 PRESIDE APT. 604 WEST PALM B		2400 PRESIDENTIAL W APT. 604	Mailing Address 2400 PRESIDENTIAL WAY APT. 604 WEST PALM BEACH FL 33401-1324			Date incorporated or Qualified			
						09/26/1996	Sa. Date of Last i	нероц	
	lace of Business	2a. Mailing Address	h - 1			4. FEI Number		pplied For lot Applicable	
Sulte, Apt. #, etc.		Suite, Apt. #, etc.	Stille Apl # etc			S8 75 Add			
22		27	remark			5. Certificate of Status Desired		Required	
City & State		City & State	<u></u>			6. Election Campaign Financing	\$5.00) May Be	
23	28		 	Trust Fund Contribution					
Zip	Country	Zip	Coun	itry		8. This corporation has liability for int	angible tax under Yes \text{No}	s. 199.032,	
24	25 9. Name and Address of Cu	reent Registered Agent	30			Florida Statutes 10. Name and Address of New Regis			
CT.	CORPORATION SYSTEM	Trent tregistered rigeria		B1	Name	10.			
	O SOUTH PINE ISLAND ROA	n							
	NTATION FL 33324		'	B2	Street Addr	ress (P.O. Box Number is Not Acceptable	,		
4	***************************************		1	В3					
•			1	B4	City		85 Zip	Code	
					•	poration submits this statement for the pur	FL S		
office or r	registered agent, or both, in the S im familiar with, and accept the o	tate of Florida. Such change w bligations of, Section 607,0505	as authorized , Florida Statu	by t ites.	the corporat	ion's board of directors. I hereby accept	the appointment a	s registered	
12.	Signature, typed or printed name of registers	d agent and title if applicable AND DIRECTORS	NO1L Registered	Agent	signature requir	ied when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE BS AND DIRECTO	RS IN 12	
TITLE		DELETE.	11 111	 F		ADDITIONS/OFFANGES TO OFFICE	☐ Change		
NAME	President, e T. Fire stol Ta chest st	de.	1.2 NAM	νIE			•		
STREET ADDRESS	J. FINESTO	NET Word work NOT	13 STR	FET A	LODRESS				
CITY-ST-ZIP	ig crest st	Westwood Mari	1.4 CIT	Y- \$1-	- 7 P			,_	
TITLE	secretory	☐ DELFTE	2:1 TITU	F			☐ Change	Addition	
NAME	A FINCOTO	ne control way	2.2 NAM						
STREET ADDRESS	2900 1113	Beach Fla 33	VA 1		ADDRESS				
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NAME			3.2 NAI	ME			-		
STREET ADDRESS			3.3 STF	REET A	ADDRESS				
CITY-ST-ZIP		, <u></u>	3.4. C(1	IY - \$1	- 2IP				
TITLE		DELETE	4.1 TiTl	LF			Change	☐ Addition	
NAME			4. 2 NA						
STREET ADDRESS					ADDRESS	(1)			
CITY-ST-ZIP TITLE		DELETE	44 C(T 5 1 T)T(_	-DP	$ 11 \stackrel{1}{\nearrow} 1$	Change	Addition	
NAME		□ MICH	5.2 NAI			\mathcal{V}	Cara Orionigo		
STREET ADDRESS					AOORESS	\4_X	•		
CITY-ST-ZIP			5.5 S T			つ			
TITLE		☐ DELETE	6111			90000216	= = mange	Addition	
NAME			6.2 NAI	ME		90000216! -05/05/970103:	9012		
STREET ADDRESS			6.3 \$16	REET A	ADDRESS	***165_00			

6 4 CITY-S1-ZIP

1 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 supplicmental 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.