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 # P96000083232 (4)

Principal Place of Business 12246 EAGLES LANDING WAY BOYNTON BEACH FL 33437 POOCOCOCC Mailing Address 12246 EAGLES LANDING WAY BOYNTON BEACH FL 33437												
								Date Incorporated or Qualified 10/04/1996	3a. Da	te of Last R	leport	7
Principal Place of Business				2a, Mailing Address 26				4. FEI Number 65'0721343			oplied For of Applicable	7
Suite, Apt #, ctc. 22				Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional additional	1
City & State				City & State				6. Election Campaign Financing			May Be	1
23				28				Trust Fund Contribution		Added	to Fees	1
Zip 24	Country			Zip Cou				8. This corporation has liability for in Florida Statutes	tangible	lax under s	. 199.032,	1
24	4) 25) 9. Name and Address of Currer			29 30 Registered Agent				10. Name and Address of New Rec				
PINI	KOW, AAR				8.	1	Name					1
12246 EAGLES LANDING WAY BOYNTON BEACH FL 33437					6:	2	Street Addre	Address (P.O. Box Number is Not Acceptable)			· 	-
BUY	INION REV	AUH FL 33437			8:	3						$\frac{1}{1}$
					84	•	City		FL	85 Zip	Code	
SIGNATURE	AAR	pent, or both, in the State ith, and accept the obligation of penticulars of regularid age.	n and h	ie if appticable (NOTI	E Registered A			oration submits this statement for the pi ion's board of directors. I hereby accept ed when reinstating)	ン/ン JATE	1/97		
12.	D	OFFIGERS AIN) DIRE	DELETE	13.			ADDITIONS/CHANGES TO OFFICE		Change	Addition	180
NAME	ARENA,	ELISE P			1.2 NAME		ł				- Induitor	15
STREET ADDRESS				2			ADDRESS					ိုင်
C(TY+ST+Z)P		N BEACH FL 33437			1.4 CITY-		ł					ĮŠ
TITLE				☐ DELETE	2.1 TITLE					Change	Addition	75
NAME					2 2 NAME		ľ					
STREET ADDRESS					23 STREE	T.	ADDRESS		1.5			Ì
CITY - ST - 7IP				<u> </u>	2. 4 C(TY		T-ZIP					4
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NAME					3.2 NAME]					
STREET ADDRESS					3 3 STREE		I					-
TOTE				DELETE	3.4 CITY-		1-2119			Change	Addition	-
NAME					4. 2 NAM		1			C) viiaigo		1
STREET ADDRESS					4.3 STREE		ADDRESS					
City-51-7P					4.4 CITY-							
Tille				DELETE	5.1 TITLE	-				☐ Change	Addition	1
NAME					5.2 NAME							1
STREET ADORESS					5.3 STREE	T.	address					
CITY:S1:ZiP					54 CITY-	ST	- ZIP					1
tili. E				DELETE	6.1 TITLE	_				Change	☐ Addition	7
NAME					62 NAME							1
STREET ADDRESS					6.3 STREE	TA	address	RESS				
OTV. ST. 2i2					SACITY.	CT.	7IP					1

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

SHATURE AND TYPED OR PHINTED NAME OF SIGNING OFFICER OF DIRECTOR

3/3/97

561.735.0220

FILED

Mar 17 1997 8:00am

Secretary of State

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