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 # P96000092528 (4)

PALM BEACH INTER-UNITED SOCCER CLUB, INC.

Mailing Address

FILED Jun 09 1997 8:00am Secretary of State



i molbarriac	o of business	Maining Address								
5315 LAKE WORTH ROAD LAKE WORTH FL 33463			5315 LAKE WORTH ROAD LAKE WORTH FL 33463-3353							
. ee							3. Date Incorporated or Qualified 11/07/1996	3a. Date o	f Last R	eporl
2. Principal Place of Business			2a. Mailing Address				4. FEI Number 65 - 07/0591		Ap	plied For
21			26				63-07/039V Not Applicable			
Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired	□ \$		Additional equired
City & State			City & State				6. Election Campaign Financing	\$5.00 May Be		
23			28				Trust Fund Contribution	Added to Fees		
Zip 24	Coun	· -	Žip 53	-	Countr	У	8. This corporation has liability for			. 199.032,
24	9. Name and Add		egistered An	ent	30		Florida Statutes 10. Name and Address of New Re	Yes N		
EDA			giotorou Ag		81	Name	IV. Name and Address of New Ne	Areteran When		
	NKUN, ELLIOTT E LAKE WODTH DO	AD								
5315 LAKE WORTH ROAD LAKE WORTH FL 33463			82 Street Ac			Street Add	dress (P.O. Box Number is Not Acceptab	ile)		
- LAN	E HUNIN PL 3340/ *	,			83					
					84	City		FL 85	Zip (Code
11. Pursuant office or r	to the provisions of Se	ctions 607.0502 and	d 607,1508, I	Florida Statute	s, the above	e-named cor v the corpora	poration submits this statement for the pation's board of directors. I hereby access		nging it	s registered
agent. I a	m familiar with, and ac	cept the obligation	s of, Section	607.0505, Flor	ida Statute	S.		The same of	75711 (46	
SIGNATURE	Signature, typed or printed na	me of remistered enem) and	Lide if explicable	/NOTE:	Poolstared An	Ant signature requ	uired when reinstating)	DATE		
12.	···	OFFICERS AND DI		thore	13.	ent aig latore requ	ADDITIONS/CHANGES TO OFFIC		FCTOR	S IN 12
TITLE	PD			DELETE	1.1 TITLE				Change	☐ Addition
NAME	ABBENANTE, RAI	.PH			1.2 NAME				_	_
STREET ADDRESS	5283 LAKE WORT				1.3 STREE	T ADDRESS				
CITY-ST-ZIP	LAKE WORTH FL	33463			1.4 CITY-	ST-ZIP				
TITLE	V O		Ĺ	DELETE	2.1 TITLE				Change	☐ Addition
NAME .	TIRILLO, ATTILLIO				2.2 NAME					
STREET ADDRESS	5283 LAKE WORT				2.3 STREE	T ADDRESS				
CITY-ST-ZIP	LAKE WORTH FL	33463		-	2. 4 CITY -	ST-ZIP				
TITLE	D	1 114 4	Ļ	DELETE	3.1 TITLE			□ (Change	Addition
NAME	GOLSHANI, ABRA				3.2 NAME					
STREET ADDRESS	5283 LAKE WORT					T ADDRESS				
CITY-ST-ZIP TITLE	LAKE WORTH FL	33 4 93	-	DELETE	3.4 CITY+ 4.1 TITLE	ST-ZIP		·	hanca	Addition
NAME			L.	_ DETECTE		ĺ		□ '	Change	Addition
STREET ADDRESS					4. 2 NAME	r ADDRECO				
CITY-ST-ZIP						ADDRESS				
TITLE	· · · · · · · · · · · · · · · · · · ·			DELETE	4 4 CITY-S	01. CIF			Change	Addition
NAME	V.		-	· -	5.2 NAME		•	۱ لیما	go	
STREET ADDRESS					5.3 STREET	ADDRESS				
CITY-ST-ZIP	•				5.4 CITY-5					
TITLE	\$5			DELETE	6.1 TITLE	-			Change	Addition
NAME	•				6.2 NAME				•	_
STREET ADDRESS					6.3 STREET	ADDRESS				
CITY-ST-ZIP					6.4 CITY - 9					

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 of signal, 13 if changed, or on an attachment with an address.

MONATURE.

5/30/91