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

PROFIT
CORPORATION
ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STAT

**FILED** 

May 02 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000096230 (3)

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Principal Place of Business Mailing Address								0   <b>                                   </b>				
346 PUTNAM AVENUE 346 PUTNAM AVENUE ORMOND BEACH FL 32174 ORMOND BEACH FL 32174-52					5220							
								-	<del></del>			
								rporated or Qualified <b>196</b>	3a. Da	te of Last Re	eport	
2. Principal Place of Business			2a. Mailin	2a. Mailing Address				er e de la compa		Ap	plied For	
21			26					341292	<u> </u>		t Applicable	
Suite, Apt.	#, OIC.		<u></u> ⊢¬	Suite, Apt. #, etc.			5. Certificate	of Status Desired		\$8.75 A Fee Re		
22 City & State	e			City & State			• Fig. 6			···	<del></del>	
23 28							l l	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip	p Country		Zip		Courit	гу	1					
24	25		29	<u>├</u>				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes \square\textbf{\sqrt{N}}\text{Yes} \sqrt{\sqrt{N}}\text{No}				
	g, Name	and Address of Curre	nt Registered A	Agent			10, Name an	d Address of New F	legistered A	gent		
CORPORATION SERVICE COMPANY						1 Name	ruby A	PIACE	UZA			
1201	1201 HAYS STREET S					2 Street Add	dress (P.O. Box N	umber is Not Accept	able)			
TALL	1201 HAYO STREET TALLAHASSEE FL 32301-2525  FOR m					346 PUTNAM AVENUR						
·			FOR	m	8	21	morp B					
					8	4 City	11/02 0 15	cucit		85 Zip C	Code	
V						<u> </u>			FL	34	174	
11, Pursuant office or r	to the provis registered ag	ions of Sections 607.05 ent, or both, in the Stat	02 and 607.150 e of Florida. Suc	8, Florida Statute ch change was a	es, the abo authorized l	ive-named co by the corpor	rporation submits l ation's board of di	this statement for the rectors. I hereby acc	<ul> <li>purpose of ept the app</li> </ul>	changing its ointment as	s registered   registered	
agent. I a	ım familiar wi	th, and accept the oblig	gations of, Section	on 607.0505, Flo	rida Statut	es.					100	
SIGNATURE	Standard	or printed and of registered as	riac	enz		lgent signature req	y A TIN	CEPZA		125	197	
12.	3131133		ND DIRECTORS		13.	igen, signature req		S/CHANGES TO OFF	ICERS AND	DIRECTOR	S IN 12	
TITLE	P			DELETE	1.1 101.6		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	27011111020 10 011	10011011110	Change	Addition	
NAME	JUBY A- PLACENZA 344 PUTWAM AVE.			1.2 NAME								
STREET ADDRESS	XORESS 346 PUTUA		n Ave.		13 STRE	ET ADDRESS						
CITY-ST-ZIP	ORMOND BENC		CH. FL	H. FL 32174		-ST-ZIP						
TITLE				DELETE	2 1 TITLE					Change	Addition	
NAME				2.2 NAM	ŧ ¦							
STREET ADDRESS	ss					ET ADDRESS						
CITY-ST-ZIP			·			/- S1-ZIP		····				
TITLE	S Tuny & Diagon		מ לג כי בי	DELETE						Change	Addition	
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STREET ADDRESS	A COLOR OF THE		in the to	2 1/2 El 322		E1 ADDRESS						
CITY-ST-ZIP TITLE	O K	S Judy A PIACENER 346 PUTNAM AVE ORMANU Beach, EL		DELETE	4 1 TITLE	7-ST-7IP		<del></del>		Change	Addition	
NAME	<b>7</b> × 0		• -			i				Change	L Roullon	
STREET ADDRESS	JUG	N A PIN	CENTA	_	4 2 NAM	ET ADDRESS						
CITY-ST-ZIP	~ 34 6 PUTNA		two than	M /10 E/ 22/7		-\$1-ZIP						
TITLE	- C 6	<del>-1200</del> 41-10	eacks1-	DELETE	5.1 117ti					Change	Addition	
NAME	JUDY A PINCENZA  34 LE PUTNAM AVEL 3217  ORMAND BEACH   DELETE		5.2 NAM	- 1								
STREET ADDRESS						ET ADDRESS						
CITY-ST-ZIP				5.4 C(TY - ST - Z(P								
TITLE		DELETE		6 1 TITLS			-		Change	Addition		
NAME					6.2 NAM	E .						
STREET ADDRESS					6 3 S1RE	ET ADDRESS						
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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 logal 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: