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 # P96000097472 (0)

DEWEY & COMPANY

Principal Place of Business 518 NORTH FEDERAL HIGHWAY	Mailing Address 518 NORTH FEDERAL HIGHWA			
LAKE WORTH FL 33480	LAKE WORTH FL 33460-3160			

FILED Jun 11 1997 8:00am Secretary of State

Principal Place of Business Mailing Address					-		
\$16 NORTH FEDERAL HIGHWAY 518 NORTH FEDERAL HIGHWAY LAKE WORTH FL 33460-3160							
		,			3. Date Incorporated or Qualified	3a. Date of Last Report	
A Deleviron	N- and D	· · · · · · · · · · · · · · · · · · ·			12/02/1996	N/A	
	Place of Business	2a. Mailing Address			4. FEI Number	Applied For	
Sulte, Apt.	# 010	26 Cuite Ast # ats			65-0738192	Not Applicable	
22 Soile, Apr.	w, 6t¢.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional	
City & Stat	le	City & State				Fee Required	
23		28			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zip	Cour	ntry	This corporation has liability for in		
24	25	29	30	•		Yes No	
	9. Name and Address of Curre	ent Registered Agent			10. Name and Address of New Reg	gistered Agent	
AME	RILAWYER CHARTERED			81 Name			
343	ALMERIA AVENUE		ŀ	82 Street Add	ARRY E. LOVING Iress (P.O. Box Number is Not Acceptab	lo)	
CORAL GABLES FL 33134				5.1	18 North Federal Highway		
			[83			
			}	84 City		B5 Zip Code	
					ake Worth	FL 33460	
11. Pursuant office or a agent. I a	to the provisions of Sections 607.05 registered agent, or both, in the Statem familiar with and accept the oblig	02 and 607.1508, Florida Stati e of Florida. Such change was gations of, Section 607.0505, F	utes, the ab authorized lorida Statu	ove-named corp by the corporations.	poration submits this statement for the pition's board of directors. I hereby accept	urpose of changing its registered it the appointment as registered	
SIGNATURE	Signature, pood or printed name of register of a	gent and title if applicable. (NO	4	570 Agent signature requi	\boldsymbol{s}	1/23,1997)	
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC		
TITLE	PD DESERVE AND ADDRESS OF	☐ DELETE	1.1 TI)!	.E		☐ Change ☐ Addition	
NAME	DEWEY, J.W. 'PETE' JR.		1.2 NA	AE .			
STREET ADDRESS	518 NORTH FEDERAL HIGHW	AY	1.3 ST	EFT ADDRESS			
CITY-ST-ZIP	LAKE WORTH FL 33460	Drugg		Y-SI-7 P	· · · · · · · · · · · · · · · · · · ·		
TITLE NAME	STD Loving, Larry E	☐ DELETE	2.1 TIT			☐ Change ☐ Addition	
STREET ADDRESS	518 NORTH FEDERAL HIGHW	AV	2.2 NAI	i			
CITY-ST-ZIP	LAKE WORTH FL 33460	ΛI	•	EET ADDRESS			
TITLE	DAIL WOMEN'S CONTROL	DELETE	2. 4 CH	Y-ST-ZIP		Change Addition	
NAME			3.2 NA			Change C Addition	
STREET ADDRESS				EET ADDRESS			
CITY-ST-ZIP				Y - S1 - ZIP		ļ	
TITLE		DELETE	4.1 T(T)			Change Addition	
NAME			4. 2 NA	ME	·		
STREET ADDRESS			4.3 STF	EFT ADDRESS			
CITY-ST-ZIP				Y - \$1 - ZIP		ļ	
TITLE		☐ DELETE	5.1 Till			Change Addition	
NAME			5.2 NAM	AE .			
STREET ADDRESS			5.3 STR	EET ADDRESS			
CITY-ST-ZIP			5.4 Cit*	Y-ST-ZIP			
TITLE		☐ DELETE	61 TIT	E		☐ Change ☐ Addition	
HAME			6.2 NAM	1E			
STREET ADDRESS			63 STR	EF1 ADDRESS			
CITY-ST-ZIP			6400	(-S1-7/P			

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 of an attachment with an address.