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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

APPROVED AND FILED

1997 OCT -6 PH 12: 46

Secretary of State DIVISION OF CORPORATIONS

	1997	DIVISION OF C	CORPORATIONS	AMARCHA DV OF OTATE
DOCUMENT # P9700000066 (5) H & S SOMERS INC.				SECRETARY OF STATE TALLAHASSEE. FLORIDA
Principal Plac	e of Business	Mailing Address		
7579 BRUNSON CIR LAKE WORTH FL 33407		7573 BRUNSON CIR LAKE WORTH FL 33467-7797		
	· L gato	2 W. 2 (10 W. 1 C 90 W. 1 )	••	2. Data locamonated or Qualified 1.2a. Data of Leat Deposit
				3. Date Incorporated or Qualified 12/31/1996 A Date of Last Report
2. Principal Place of Business		2a. Mailing Address		4. FEI Number Applied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.		\$8.75 Additional
22		27		5. Certificate of Status Desired Fee Required
City & Stat	e	Gity & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for intangible tax under s. 199,032,
24	25 9. Name and Address of Curre	29	30	Florida Statutes Yes No 10. Name and Address of New Registered Agent
SON	IERS, HENRY K	ar neglatered Agent	81 Name	<del></del>
7573 BRUNSON CIR LAKE WORTH FL 33407			82 Stree	t Address (P.O. Box Note: 1 No Advantable) 5 1 2 3 - 7
			83	<u>-10/08/9701057028</u>
				****550.00 ****550.00
			84 City	FL 85 Zip Code
office or i	registered agent, or both, in the Stat	e of Florida. Such change was a	authorized by the co	d corporation submits this statement for the purpose of changing its registered rporation's board of directors. I hereby accept the appointment as registered
agent. I a	am familiar with, and accept the obliq	gations of, Section 607.0505, Flo	orida Statutes.	· · · · · · · · · · · · · · · · · · ·
SIGNATURE	Signature, typed or printed name of registered as			rc required when reinstaturg) DATE
12.	OFFICERS AN	ND DIRECTORS DELETE	13. 1,1 TITLE	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
NAME	SOMERS, HENRY K		1.2 NAME	Citaligo Capacitan
STREET ADDRESS	7573 BRUNSON CIR		1.3 STREET ADDRESS	
CITY-ST-ZIP	LAKE WORTH FL 33407		1.4 CITY - ST - ZIP	
TITLE	D OLIFON OLIOANINE II	L. DELETE	2 1 TITLE	Change Addition
NAME	SOMERS, SUSANNE K 7573 BRUNSON CIR		2 2 NAME	
STREET ADDRESS CITY-ST-ZIP	LAKE WORTH FL 33407		2.3 STREFT ADDRESS	+
TITLE		DÉLÉTÉ	2 4 CHY-ST-ZIP 3.1 TITLE	Change Addition
NAME			3.2 NAME	
STREET ADDRESS			3.3 STREET ADDRESS	
CITY-ST-ZIP			3 4. CITY-S1-ZIP	
TITLE		DELETE	4.1 1ITLE	Change Addition
NAME 💊			4. 2 NAME	
STREET ADDRESS			4.3 STREET ADDRESS	
CITY-ST-ZIP		DELETE	4.4 CITY-ST-ZIP 5.1 TITLE	Change Addition
NAME			5.2 NAME	The state of the s
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5 4 CHTY - SI - ZIP	Λ Δ
TITLE		DELETE	61 1ITUF	Change Change
NAME			62 NAME	THE THE PARTY IN
STREET ADDRESS	<u>'</u>		6.3 STREET ADDRESS	1010

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.