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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 01 1997 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # S07421 (8)

FISCHER & ASSOCIATES, ARCHITECTS & PLANNERS, P.A.

Principal Pla 2700 S. CYPF	ice of Business RESS CREEL RD., SUITE B-110 DALE FL 33309-8837	Mailing Address	REEL RD., SUITE B-110		
US				3. Date Incorporated or Qualified 10/22/1990	3a. Date of Lest Report 07/30/1996
21	Place of Business	2a. Mailing Address 26		4. FEI Number 65-0232204	Applied For Not Applicable
Suite, Apt		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Sta	ale	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for i	
24	25	29	30		Yes No
	9. Name and Address of Curre	ent Registered Agent		10. Name and Address of New Re	gistered Agent
	SCHER, DONALD A. P.A.	Colore D	81 Name		
	00 W. Cypress Creek RD., Sl	UITE B-110	82 Street Add	dress (P.O. Box Number is Not Acceptab	le)
FI.	. LAUDERDALE FL 33309		ļ <u>.</u>		
			83		
			84 City		85 Zip Code
					FL
agent I SIGNATURE	Signature Typed or printed hame of registered a	agent and title d applicable	(NOTE: Registered Agen) signature requ		DATE
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	
TITLE	DP DOWN DANKE	DELETE	1.1 TITLE		Change Addition
NAME	FISCHER, DONALD A.		1.2 NAME		
STREET ADDRESS		•	1.3 STREET ADDRESS		
CITY - \$1 - 7HP	FT. LAUDERDALE FL		1.4 CITY - ST - ZIP		
TITLE		DELETE	2.1 TITLE		Change Addition
NAME			2.2 NAME		
STHEET ADDRESS	5 }		2.3 STREET ADDRESS		
CITY+ST-ZIP			2. 4 CITY - ST - ZIP		
TOTALE	.	DELETE	3.1 TITLE		Change
NAME	1		3 2 NAME	·	
STREET ADDRESS	6		3 3 STREET ADDRESS	* .	
CITY-ST-7IP			3.4. CITY-SY-ZIP		
TITLE	1	DELETE			Change Addition
NAME			4. 2 NAME		
STREET ADDRESS	5		4.3 STREET ADDRESS		
CHY-SI-7IP			4.4 CITY-ST-ZIP		
THT (E		DELETE	3 I		Change Addition
NAME	}		5.2 NAME		
STREET ADDRESS	S		5.3 STREET ADDRESS		
CITY - ST- ZIP			5.4 CITY - ST - ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME:	1		62 NAME		
Closes appores					
STREET ADDRESS	5		6.3 STREET ADDRESS		

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 attractional memory and appears in Block 12 or Block 13 if changed, or of an attractional memory and appears in Block 12 or Block 13 if changed, or of an attraction memory and appears in Block 12 or Block 13 if changed, or of an attraction memory and appears in Block 12 or Block 13 if changed, or of an attraction memory and appears in Block 12 or Block 13 if changed in the same legal effect as if made under oath; that