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

PROFIT CORPORATION ANNUAL REPORT

1997

CITY-ST-ZIP

SIGNATURE:

appears in Block 12 or Block 13 if changed



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S13965

MR. COPY BUSINESS MACHINES, INC.

(6)

Jan 22 1997 8:00am Secretary of State

FILED

Principal Place of Business 4355 PETERS ROAD PLANTATION FL 33317		Mailing Address 4355 PETERS ROAD PLANTATION FL 33317-4542		(100 Half 101 11000 Hills 19110 Stell and albu stell attra albu albu albu albu		
					3. Date Incorporated or Qualified 12/01/1990	3a. Date of Last Report 01/31/1996
2. Principal F	Place of Business	2a. Mailing Address 26			4. FEI Number 65-0096631	Applied For Not Applicable
Suite, Apt #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Ζφ	Count	У	This corporation has liability for	
24	25 9. Name and Address of Curren	29 Agent	30		Florida Statutes L 10. Name and Address of New Re	Yes No
VAI		r negistered wigerit	В	Name	10. Name and Address of New Ne	gistered Agent
	NDERPLATE, WARREN 55 PETERS ROAD		L	, turno		
	ANTATION FL 33317		В	Street Ad	ddress (P.O. Box Number is Not Acceptat	ole)
'0	ANTAHON I E SOOTI		8	9		
			8	City	· · · · · · · · · · · · · · · · · · ·	85 Zip Code
≤ ¶ Durayent	t to the manifeless of Costinue 607.050	2 and CO7 1EO9 Finder Ctat	des the elec	la namada	orporation submits this statement for the p	FL 60 2 P Cook
office or	registered agent, or both, in the State am familiar with, and accept the obliga	of Florida. Such change was	s authorized f	y the corpo	oration's board of directors. I hereby accept	ot the appointment as registered
SIGNATURE	Signature typici or printed name of registerio age	ct and title if appticable (N	OTE: Registered A	neat signature re	quired when reinstating)	DATE
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE		· · · · · · · · · · · · · · · · · · ·	Change Addition
NAME	VANDERPLATE, WARREN		1.2 NAM	:		
STREET ADDRESS			1.3 STRE	ET ADDRESS		•
CITY-ST-ZIP	PLANTATION FL		1.4 CITY	ST-ZIP		
TITLE	D	☐ DELETE	2.1 TITLE			Change Addition
NAME	VANDERPLATE, RONALD		2.2 NAM			·
STHEET ADDRESS			2.3 STRE	T ADDRESS		
City-St-ZiP	PLANTATION FL.		2.4 CITY			
TITLE		☐ DELETE	3.1 TITLE			Change Addition
NAME			3.2 NAM			
STREET ADDRESS				T ADDRESS		
DITY-ST-ZIP TITLE		DELETE	3.4. CITY 4.1 TITLE			Change Addition
NAME		C) prifit	4.1 BILE 4. 2 NAM			C change C Addition
STREET ADDRESS				ET ADDRESS		
CITY-ST-ZIP TITLE		☐ DELETE	4.4 CITY 5.1 TITLE			☐ Change ☐ Addition
NAME			5.2 NAM			man
STREET ADDRESS				ET ADDRESS		
DITY-ST-7IP	1		5.4 CITY			1
TITLE		DELETE	6.1 Title			Change Addition
NAME			6.2 NAM			_ · _
STREET ADDRESS				ET ADDRESS		

6.4 CITY-ST-ZIP

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

Vanderplate, Ares. 1/15/97

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