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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 07 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S23171

(9)

GENIE APPEL, INC.

STREET ADDRESS

**SIGNATURE** 

CITY - ST- ZiP

Principa: Plac	e of Business	Maili	Mailing Address							
1701 VESTAL ( CORAL SPRING			1701 VESTAL DRIVE CORAL SPRINGS FL 33071-5863							
							3. Date incorporated or Qualified 01/07/1991		te of Last 17/1996	Report
2. Principal Place of Business			2a. Mailing Address				4. FEI Number			Applied For
11		26					65-0236269			ot Applicable
Suite, Apt	#, etc.	27 S	Suito, Apt. #, etc.				5. Certificate of Status Desired			Additional Required
City & Stat	e	j	City & State				8. Election Campaign Financing	_		May Be
3	errer en el erre Sameinerrer em	28		<del></del>			Trust Fund Contribution	<u> </u>	Addec	to Fees
Zip 53	Country	<u> </u>	ip .	h	untry	,	B. This corporation has liability for		-	s. 199.032,
24]	25] g. Name and Address of Curr	29	red Anent	30	т—		10. Name and Address of New Re	Yes L		
		one register	DO Agont		81	Name	IO, Idania and Madion of Hori III	giotorio i	igori,	<u> </u>
APPEL, GENIE B. 1701 VESTAL DRIVE										
CORAL SPRINGS FL 33071					82	Street Add	lress (P.O. Box Number is Not Acceptal	ble)		
COF	VAL SPAINOS PL SSU/ I				83			<del></del>	•	
									T1	- <u>-</u>
					84	City		FL	85 Zip	Code
office or r agent 1 a SIGNATURE	registered agent, or both, in the Starn familiar with, and accept the ob-						poration submits this statement for the pation's board of directors. I hereby acce	pt the app	intment a	s registered
12.		ND DIRECT		13.			ADDITIONS/CHANGES TO OFFI		DIRECTO	PRS IN 12
THE	٥		☐ DELETE		ITLE				☐ Change	
NAME	APPEL, GENIE B.			1.21	NAME					
STREET ADDRESS	1701 VESTAL DRIVE CORAL SPRINGS FL			1.3 9	STREET	ADDRESS				
CITY - ST - 7:81				1.4 0		ST-ZIP				
TILE			☐ DELETE	DELETE 2.1 T					☐ Change	Addition
NAME				221	NAME					
STREET ADDRESS				233	STREET	ADDRESS				
CHY-SI-ZF			Locusto			ST-ZIP			1 105	T Adams
ווונו			L. DELETE		IITLE				L Change	Addition
NAME					NAME	1000000				Ī
STREET ADDRESS				4		ADDRESS				
City St-749 Title	 		DELETE		LITLE	ST-ZIP			Change	Addition
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STREET ADDRESS						ADDRESS				}
CITY-ST Zirt					CITY-S					ļ
THE			DELETE		TITLE	· · · · · · · · · · · · · · · · · · ·			Change	Addition
NAME				521	NAME					1
STREET ACORESS				533	STAEET	ADDRESS				
CITY-ST-7/9				541	CITY-S	ST-ZIP				
THE		······	DELETE	61	TITLE				Change	Addition
NAME				621	VAME					

63 STREET ADDRESS 64 DITY-ST-ZIP

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 eath; 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.