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

**CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S26291

(2)

ANHON,	, INC.								
Principal Plac	e of Businoss	Mailing Address					<b>e</b> k		
801 BRICKELL AVE. 9TH FLOOR MIAMI FL 33131 US		1600 GOLF ROAD SUITE 1200 ROLLING MEADOWS IL 60008-4229			3. Date Incorporated or Qualified	3a. Date o		Report	
O Dilegiani D	Nan of Physics	The second transfer				01/22/1991	04/23/		
<del>_</del>	Place of Business	2a. Mailing Address			4. FEI Number		h	oplied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			36-3744373			ot Applicable Additional	
22		27			5. Certificate of Status Desired			equired	
City & State	e	City & State			6. Election Campaign Financing		\$5.00	May Be	
23		28				Trust Fund Contribution			to Feos
Zip	Country	Zip 1.∃1	Cour	itry		8. This corporation has liability for in			i. 199.032,
24	[25] 9. Name and Address of Curren	29	[30]			Florida Statutes  10. Name and Address of New Reg	Yes L N		
OT /		it Hegistered Agent		81	Name	to. Name and Address of New Reg	istered Age		
	CORPORATION SYSTEM O S. PINE ISLAND ROAD								
PLANTATION FL 33324				82	Street Addre	ess (P.O. Box Number is Not Acceptable	D)		
1 674				83					<u></u>
				B4	City			=T =	0.4
				"	City		FL  8	<b>5</b> 7 (p)	Code
agent I a	to the provisions of Sections 607.050 registered agent, or both, in the State im familiar with, and accept the obligi	12 and 607,1508, Florida Statu of Florida, Such change was ations of, Section 607,0505, F	tes, the ab authorized lorida Stati	ove Lby ites.	-riamed corpo the corporatio	oration submits this statement for the pu on's board of directors. I hereby accept	rpose of cha the appoint	inging i ment as	ts registered registered
SIGNATURE	Signature, lyped or printed name of registered age	ert and title if applicable (NO	If Registered	Ager	Ls gnature require	d where reinstating)	DATE		
12.	OFFICERS ANI		13.			ADDITIONS/CHANGES TO OFFICE		RECTO	RS IN 12
TITLE	D	DELETE		1,1 TITLE				Change	Addition
NAME	WHITEHOUSE, RONALD R.		1,2 NAI	1,2 NAME					
STREET ADDRESS	1600 GOLF RD., STE. 1200	1 3 STRE		REET A	ADDRESS				
CITY-ST-ZIP	ROLLING MEADOWS IL		11 1 THE SEC. OF	1.4 CHY- ST- ZIP					
TITLE	D DOUBDO ANNESTE			21 THLE				Change	L Addition
NAME OXOGET ABODESOS	REIZBURG, ANNETTE 1600 GOLF RD., STE. 1200		2 ? NAME						
STREET ADDRESS	ROLLING MEADOWS IL		2.3 STREET ADDRESS						
CITY-ST-ZIP TITLE	CFO			2 4 CITY - ST - ZIP 3 1 TITLE				Change	Addition
NAME	KERL, DONALD	[	3.2 NAI			•	المسا	Onlinge	L Addition
STREET ADDRESS	1600 GOLF RD, STE 1200		3.3 STREE		ADDRESS.				
CITY-ST-ZIP	ROLLING MEADOWS IL	NI NO MEADONO II		Y-ST					
TITLE				4.1 TITLE				Change	Addition
NAME			4, 2 NA	NE					
STREET ADDRESS			4,3 S1F	EET A	ADDRESS				
CITY-ST-ZIP			4,4 CIT	4,4 CITY - ST - ZIP					
TITLE		☐ DELETE	511016					Change	☐ Addition
NAME			5,2 NAN						
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP	PULTE			5,4 CITY-ST-ZIP			·	Obacto	Adaption
TITLE		LJ DELETE	611III				L	Change	Addition
NAME CIDECT ADDRESS			6,2 NAM		DOM: GO				
STREET ADDRESS				HELA V-SI	DDRESS				

14. I do hereby certify that the information of information indicated on this annual report I am an officer or director of the coporation appears in Block 12 or Block 13 if changes oppied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the order of presental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that ligh or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

**FILED** 

May 09 1997 8:00am

Secretary of State