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

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(1)

1997 APR 30 AH 11: 49

SECRETARY OF STATE TALLAHASSEE, FLORIDA

APPROVED AND FILED

ı	ADAMS	BUILDING	MANAGEMENT,	INU

Principal Place of Business 200-S. ANDREWS AVE. 6TH FLOOR FT-LAUDERDALE FL 33301

Mailing Address

200-6-ANDREWS AVE. 6TH FLOOR FT LAUDERBALE PL-3337-1884

<u>.</u>			3. Date Incorporated or Qualified 02/20/1991 3a. Date of Last Report 05/01/1996	
2. Principal P	lace of Business 24. Mailing Address	61 07	4. FEI Number Applied Fo	or
21 450 EA	IST LAC CLAS /YVD 28 450 EAST LAS	5 Clas Du	9 65-0255677 Not Applic	able
Suite, Apt		500	5. Certificate of Status Desired Fee Required	al
City & State		NF FC	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees	
24 <sup>Z(ρ</sup> 33.	30/ 25 USA 29 33301 3	J USX	8. This corporation has liability for intengible tax under s. 199.03: Florida Statutes X Yes No	12,
	9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
AME	ERICAN INFORMATION SERVICES INC.	61 Name		
	E 3RD AVE	62 Street A	ddress (P.O. Box Number is Not Acceptable)	
	H FL	Dr. Street A	doress (F.O. box Normoer is Not Acceptable)	
	MI FL 33131	83		
		<u> </u>		
		84 City	85 Zip Code	
11. Pursuant	to the provisions of Sections 607,0502 and 607,1508. Florida Statutes	the above-named o		ered
office or re	egistered agent, or both, in the State of Florida. Such change was aut	thorized by the corpo	orporation submits this statement for the purpose of changing its register oration's board of directors. I hereby accept the appointment as register	red
agent. La	m ramiliar with, and accept the obligations of, Section 607.0505, Florit	da Statutes.		
SIGNATURE	Signature typed or printed name of registered agent and title if applicable (NOTE: F	Registered Agent signature re	aculad when reinstating) DATF	
12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DPS DELETE	1.1 TITLE	Change Ad	
NAME	ROCHON, RICHARD C.	1.2 NAME		
STREET ADDRESS	200 S. ANDREWS AVE. 8FL.	_ ·····	450 EAST LAS OLAS BLVD , SO ITE 1500	
	FT LAUDERDALE FL			
CITY-ST-ZIP TITLE	T DELETE	1.4 CITY-ST-ZIP 2.1 TITLE	Ft. LAUDERDALE, FC 33301 Rt Change [] Add	dition
<b>`</b>	BRANDEN, CRIS V		المراسية والمراورة المرام	Union
NAME	200 S. ANDREWS AVE. 6FL.	2.2 NAME	460 EAST LAS OLAS BLVD, SUITE 1500	i
STREET ADDRESS	FT.LAUDERDALE FL			
Dity-St-7IP	VPAS DELETE		FT. LAUDERDALE, FL 33301	idition
TITLE	PIERCE, WILLIAM M	3.1 TITLE	K cumiling ☐ Mr.	MONIO
NAME	200 S. ANDREWS AVE. 6TH FLOOR	3.2 NAME	USA EAST LAS DIAS BLUD, SUITE	1.572
STREET ADDRESS	FT LAUDERDALE FL 33301			
CITY - S1 - ZIP			TALANDER DALE, FL 3330/	Idition
FITLE	DELETE	4.1 TITLE	LI Change LI Add	ווטווטו
NAME		4. 2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS	700002160997	2
CHTY-ST-7IP		4.4 CITY-ST-ZIP	-05/01/9701001020	
TITLE	☐ DELETE	5.1 TITLE	***3300.00 ****165.0	Hion
NAME		5.2 NAME	Compare where the compared the compared to the	-
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZiP		5.4 CITY-ST-ZIP		
THTLE	☐ DELETE	61 TITLE	Change Ad	ddition
NAME		62 NAME	_ (Δ <b>λ</b> )	1
STREET ADDRESS		63 STREET ADDRESS	15/h/a	•
CITY-ST-ZIP		6 4 CITY-ST-ZIP	6I''	

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 of 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 charged or op an attachment with an address.

SIGNATURE:

SHING OFFICER OR DIRECTOR

954-627-5000