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 # S47993

(8)

FULL CIRCLE PROJECTS, INC.

Mailing Address
1501 S.E. 15TH STREET UMT 35 FT LAUDERDALF FL 33316-2751

FILED Apr 30 1997 8:00am Secretary of State



		1501 S.E. 15TH STREET UNIT 35					
FT. LAUDERDA	ALE FL 33316	FT. LAUDERDALE FL 333	16-2751				
				3. Date Incorporated or Qualified 04/25/1991	3a. Date of Last Report 04/17/1996		
2. Principal P	lace of Business	2a. Mailing Address	2a. Mailing Address		4. FEI Number	1	pplied For
21		26		65-0267312	}}	lot Applicable	
Sulte, Apt.	Suite, Apt. #, etc. Suite, Apt. #, etc.						Additional
22		27	27		5. Certificate of Status Desired Fee Required		
City & State	City & State City & State				6. Election Campaign Financing	\$5.00	May Be
23	28				Trust Fund Contribution	Added	to Fees
Zip	Country	Zip	Country		8. This corporation has liability for i		
24						Yes 🔏 No	
	9, Name and Address of Currer	nt Registered Agent	8		10. Name and Address of New Re	listered Agent	
	LLIPS, KAREN R.		8	1 Name			
	1 S.E. 15TH STREET		8	2 Street Add	dress (P.O. Box Number is Not Acceptab	le)	
UNIT 35			L				
FT.	LAUDERDALE FL 33316		8	3			
			8	4 City		— 8 5 Zip	Code
						FL	
11. Pursuant office or r agent. I a	to the provisions of Sections 607,050 egistered agent, or both, in the State im familiar with, and accept the oblig)2 and 607.1508, Florida Statu e of Florida. Such change was ations of, Section 607.0505, Fi	ites, the abo authorized l lorida Statut	ve-named cor by the corpora es.	poration submits this statement for the pation's board of directors. I hereby accep	urpose of changing I the appointment a	its registered s registered
SIGNATURE						_	
	Signature typod or printed name of registered app			gent signature requ	aired whore reinstalling)	DATE	50 11112
12.	PST OFFICERS AN	D DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO OFFIC	Change	
		Fin perceit	1.1 TITLE			Change	ETT Manifoli
NAME	PHILLIPS, KAREN R. 1501 S.E. 15TH ST. #35		1.2 NAM				
STREET ADDRESS	FT. LAUDERDALE FL			ET ADDRESS			
CITY-ST-ZIP TITLE	VD	DELETE	1.4 CITY			Change	Addition
	PHILLIPS, KAREN R.	LIDELLE	2.1 TITLE	1	•	change	L Addition
NAME	1501 S.E. 15TH ST. #35		2.2 NAMI				
STREET ADDRESS	FT. LAUDERDALE FL		1	ET ADDRESS			
CITY-ST-ZIP TITLE	FI. LAUDENDALE FL			- S1 - 7/P		Change	Addition
		L.J DILLIC	311111			L_1 change	☐ Adollion
NAME			3 2 NAM				
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP TITLE		DELETE	3.4. C(TY 4.1 T)T({			Change	Addition
NAME		D bearie	4.1 htte			[brigings	L.J Addition
STREET ADDRESS				ET ADORESS			
CITY-ST-ZIP		DILETE	4.4 CITY 5.1 TITLE			Change	Addition
NAME		C OUT	5.2 NAM	•		□ Ovenige	☐ Vagilian
				·			
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP TITLE		DELETE	5.4 C/TY			Change	Addition
		∟ vittit	611NLE			□ cuange	AUGINON
NAME			6.2 NAM				
STREET ADDRESS			4	ET ADDRESS			
CITY-ST-ZIP	<u> </u>		6.4 CITY	-S1-7iP			

4. 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 crefify 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 trusted 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.

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