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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

,	JAL REPORT <b>1997</b>	Sec	Secretary of State DIVISION OF CORPORATIONS			Secretary of State				
DOCUI	MENT #	S56856	(5)		••••	<del>,,,, =,,,,,,</del> ,,,,,,,,,,,,,,,,,,,,,,,,,,				
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Principal Place of Business Mailing Address										
6040 VISTA LINDA LANE BOCA RATON FL 33433 BOCA RATON FL 33433-8223										
							<ol> <li>Date incorporated or Qualified 05/30/1991</li> </ol>	4. 4	ite of Last Ri 01/1996	eport
2, Principal Place of Business			2a. Mailing Address			4. FEI Number	1 997	Ap	plied For	
Suite, Apt #, etc.			Suite, Apt. #, etc.			65-0265621		\$8.75 A	ot Applicable Additionat	
22			27				5. Certificate of Status Desired	L.)	Fee Re	·
City & State	e		City & State				6. Election Campaign Financing Trust Fund Contribution		\$5.00 Added 1	
Zip .	<del> </del> 1	Duntry	Zip		intry	,	8. This corporation has liability for		tax under s.	
24 25 29 30  g. Name and Address of Current Registered Agent							Florida Statutes  10. Name and Address of New Re	Yes [		
GEF	RROW, JEFFREY				B1	Name	100	<u> </u>		
465 EAST PALMETTO PARK ROAD					82	Street Add	dress (P.O. Box Number is Not Acceptat	le)		<del></del>
BOCA RATON FL 33432								<del></del>		
					83				-13-1	
								FL	1 1	Code
11. Pursuant office or r	to the provisions of egistered agent, or	Sections 607.0502 both, in the State of	and 607.1508, Florida S of Florida, Such change v	tatutes, the a	bovi d by	e-named co	rporation submits this statement for the pation's board of directors. I hereby accept	urpose of	changing it ointment as	is registered registered
!	m familiar with, and	d accept the obligat	ions of, Section 607.050	5, Florida Sta	tute	<b>S</b> .	. ,	,,		,
SIGNATURE	Signature, typed or printe	d name of registered agen		(NOTE: Registere	d Age	ent signature req	uired when reinstating)	DATE		
12.		OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICE	ERS AND		
TITLE	D Wang, Frani	·	DELETE						L Change	☐ Addition
NAME STREET ADDRESS	6040 VISTA LI			1.2 N		, annource				
CITY-S1-ZIP	BOCA RATON					ADDRESS ST-ZIP				
THIE	D		DELETE			11-211		··········	Change	Addition
NAME	WANG, CINDY	' C.		2.2 N	AME					
STREET ADDRESS	6040 VISTA LI			2.3 S	TREET	ADDRESS	'af			
City-St-ZiP	BOCA RATON	FL			CITY-	ST-ZIP				
TITLE	}		DELETE	<b>6</b>		1		;	☐ Change	Addition
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NAME	l				iame	1				
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STREET ADDRESS						ADDRESS				
CITY-ST-ZIO			DELETE			ST-ZIP			Change	☐ Addition
TITLE NAME			LI DELETE	6.1 T 6.2 N		1			LI VIBILIE	- Audition
STREET ADDRESS	}					ADDRESS				
PiTy - ST - Zip						ST-7IP				

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 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.

Daytime Phone #

**FILED** 

Apr 16 1997 8:00am