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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Feb 17 1997 8:00am

Secretary of State

941-366-6660

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

**DOCUMENT # \$64565** 

(2)

CAPE HA		UP, INC.		` ,							
Principal Place of Business Mailing Address								T COMESTORIO LING DIVINC REREAL DISTRO DITAGE MULT.	ainsi hibit di	Mei Merit Andri M	//
240 S. PINEAPPLE AVE.  10TH FLOOR  SARASOTA FL 34236  240 S. PINEAPPLE AVE.  10TH FLOOR  SARASOTA FL 34236-6717											
								3. Date Incorporated or Qualified 07/08/1991		ite of Last Re )1/1996	eport
2. Principal Pl	ace of Busin	ess	2a. Mailing	2a. Mailing Address				4, FEI Number		Ap	plied For
21			26				65-0299000	Not Applicable			
Suite, Apt. #, etc.			27				Certificate of Status Desired		\$8.75 A Fee Re		
City & State			<b></b> η ΄	Crty & State			6. Election Campaign Financing	_	\$5.00		
Zip	Country		28 Zin			Country		Trust Fund Contribution	intennible	Added to	
24	<u> </u>	25	·	29 30				8. This corporation has liability for intangible tax under s. 199.032. Florida Statutes Yes No			199.002,
	9. Name	and Address of Cu	rrent Registered Ag	ent				10. Name and Address of New Re	gistered /	Agent	
BANI	D, DAVID S					81	Name				
240 S. PINEAPPLE AVE. 10TH FLOOR						82	Street Add	ress (P.O. Box Number is Not Acceptal	ole)	<del></del>	
	ASOTA FL	34236							<del></del>		
					i	B4	City	· · · · · · · · · · · · · · · · · · ·	FL	85 Zip (	j
11. Pursuant to office or reagent. Lar	to the provisi egistered ag m familiar wi	ons of Sections 607 ent, or both, in the S th, and accept the c	.0502 and 607.1508, State of Florida Such obligations of, Section	Florida Statute change was a 607.0505, Flo	es, the a uthorize orida Stat	bove d by lutes	-named corporation	poration submits this statement for the tition's board of directors. I hereby acce	ourpose of ot the app	changing its ointment as	s registered registered
SIGNATURE			rd agent and little d applicable					red when reinstating)	DATE	<del></del>	
12.	orginalist, 1918-0		AND DIRECTORS	(451)	13.	o regar	ra signicia e regar	ADDITIONS/CHANGES TO OFFIC		DIRECTOR	S IN 12
TITLE	D			DELETE	1.1 1	TLE				Change	Addition
NAME	BAND, MY				1.2 N	AME					
STREET ADDRESS		MINGO AVE.			1.3 \$	REET.	ADDRESS				
CITY-ST-ZIP	SARASOT	A FL				ITY-SI	r-zip		·····		
TITLE .	VP	USD A	L	DELETE	2.1 11					Change	Addition
NAME	BAND, DA		THE OOD			2.2 NAME					ļ
STREET ADORESS		NEAPPLE AVE, 10 'A FL 34236	IIII FLOOR	rtoon			ADDRESS				
CITY-ST-ZIP TITLE	SANASUI	M FL 34230		DELETE	2. 4 C		ST - ZIP	······································		Change	Addition
NAME					3.2 N					primite	
STREET ADDRESS					1		ADDRESS				
CITY - ST - ZIP							ST-ZIP				
TITLE				DELETE	4.1 TI				<del></del>	Change	Addition
NAME					4.2 N	IAME					
STREET ADDRESS					4.3 \$	TREET	ADORESS				
CITY - S1 - ZIP					44 C	ITY-S	T-ZIP				
TITLE				DELETE	5.1 TI					Change	Addition
NAME					5.2 N		ľ				
STREET ADDRESS					1		address				ļ
CITY-SI-7IP				DELETE	5.4 C 6.1 Ti	TLE	T-ZIP			Change	Addition
TITLE NAME			L		6.2 N					CT Curantito	Admini
STREET ADDRESS							ADDRESS				
CITY-ST-ZIP					1	ITY - S'	1	$\sim N_0^{\alpha_1}$			
M.A. Lala Sancal	by certify tha	t the information sur	pplied with this filing o	loes not qualif	in fac the	0110	mation states	d in Section 119.07(3)(i), Florida Statute	s. I further	certify that	the
informatio Lam an o appears i	n indicated ( fficer or direc n Block 12 o	on this annual report stor of the corporate r Block 13 if change	t or supplemental ann on or the receiver or to ed, or on an attachme	ual report is to rustee empoy	rue and a ered to d dress.	BXECU	rate and tha ute this repo	of it section 19.07(2)), Florida Statute t my signature shall have the same leg- rt as required by Chapter 607, Florida	ai effect as Statutes; ai	if made und nd that my n	Jer oath; that lame