

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.  
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

APPROVED  
AND  
FILED

pg. 1

97 AUG 14 AM 10:39

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # S64566

(0)

1. Corporation Name  
BUYER'S BROKER OF BOCA, INC.



Principal Place of Business RR 1 BOX 565 WEAVER MN 55910 US	Mailing Address 819 RUDOLF ROAD LAKE WORTH FL 33461 US
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21 <u>RR1 Box 236</u> Suite, Apt. #, etc. 22 City & State 23 <u>Altura, MN</u> Zip 24 <u>55910</u> Country 25 <u>USA</u>		2a. Mailing Address 26 <u>RR1 Box 236</u> Suite, Apt. #, etc. 27 City & State 28 <u>Altura, MN</u> Zip 29 <u>55910</u> Country 30 <u>USA</u>		3. Date Incorporated or Qualified <u>07/08/1991</u>	3a. Date of Last Report <u>08/07/1996</u>	4. FEI Number <u>65-0271777</u> Applied For Not Applicable	5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
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9. Name and Address of Current Registered Agent CARL, CHRIS 55 TROPIC ISLE DRIVE SUITE 37 DELRAY BEACH FL 33483		10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code	
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	<u>RR1 Box 236</u>
CITY-ST-ZIP		1.4 CITY-ST-ZIP	<u>Altura, MN 55910</u>
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 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, changed, or on an attachment with an address.

SIGNATURE \_\_\_\_\_

7/29/97

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**Winning Video Productions**

RR1 Box 236

Altura, MN 55910

PHONE: 507-932-3351 - FAX: 507-932-5988

email: [webmaster@wvp.com](mailto:webmaster@wvp.com)

Home Page: <http://www.wvp.com>

7/28/97

Dear Division of Corporations,

Enclosed please find the 1997 Annual Report for Buyer's Broker of Boca, Inc. along with my check, # 1671, for \$173.75 which is the filing fee of 165.00 plus 8.75 for a Certificate of Status. I did not receive the first notice. Please notice the changes in address and telephone number indicated on the report and change your records accordingly.

Thank you for your patience and understanding in this matter.

Sincerely,



Chris Carl  
President