

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

FILED  
Mar 26 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **S65088** (4)

1. Corporation Name  
**MIKE REUTER CORPORATION**

Principal Place of Business  
**6565 N.W. 46TH ST.  
LAUDERHILL FL 33319-4151**

Mailing Address  
**6565 N.W. 46TH ST.  
LAUDERHILL FL 33319-4151**



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>07/09/1991</b>	3a. Date of Last Report <b>03/22/1996</b>
21. <b>12600 Burning Tree Lane</b> Suite, Apt. #, etc.	26. <b>12600 Burning Tree Lane</b> Suite, Apt. #, etc.	4. FEI Number <b>59-2136020</b>		Applied For Not Applicable	
22. <b>Coral Springs FL</b> City & State	27. <b>Coral Springs FL</b> City & State	5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23. <b>33071</b> Zip	28. <b>33071</b> Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24. <b>USA</b> Country	29. <b>USA</b> Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		10. Name and Address of New Registered Agent	
9. Name and Address of Current Registered Agent <b>REUTER, MICHAEL 6565 N.W. 46TH ST. LAUDERHILL FL 33319</b>		81. Name			
		82. Street Address (P.O. Box Number is Not Acceptable) <b>12600 Burning Tree Lane</b>			
		83.			
		84. City <b>Coral Springs</b>			
		85. Zip Code <b>FL 33071</b>			

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's signature required when reinstating)		DATE	
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
1.1 TITLE <b>PO</b>		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
1.2 NAME <b>REUTER, MICHAEL</b>		1.2 NAME			
1.3 STREET ADDRESS <del>6565 N.W. 46TH ST.</del>		1.3 STREET ADDRESS <b>12600 Burning Tree Lane</b>			
1.4 CITY-ST-ZIP <del>LAUDERHILL FL</del>		1.4 CITY-ST-ZIP <b>Coral Springs FL 33071</b>			
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
2.2 NAME		2.2 NAME			
2.3 STREET ADDRESS		2.3 STREET ADDRESS			
2.4 CITY-ST-ZIP		2.4 CITY-ST-ZIP			
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
3.2 NAME		3.2 NAME			
3.3 STREET ADDRESS		3.3 STREET ADDRESS			
3.4 CITY-ST-ZIP		3.4 CITY-ST-ZIP			
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
4.2 NAME		4.2 NAME			
4.3 STREET ADDRESS		4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP		4.4 CITY-ST-ZIP			
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
5.2 NAME		5.2 NAME			
5.3 STREET ADDRESS		5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP		5.4 CITY-ST-ZIP			
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition			
6.2 NAME		6.2 NAME			
6.3 STREET ADDRESS		6.3 STREET ADDRESS			
6.4 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 further certify that the information included 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.

SIGNATURE: **Michael Reuter**  **3-21-97** **954-796-3170**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)