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

PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

May 06 1997 8:00am

Secretary of State

Daytime Phone #

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S72376

Principal Place 500 NE-00TH STBOGA RATON F	F.	Mailing Address - 500 NE 00TH ST BOOM RATION FL 00401	-5944				
					3. Date Incorporated or Qualified 07/31/1991	3a. Date of 05/01/	Last Report
2. Principal Pla	ce of Business	2a. Mailing Address			4. FEI Number	00/01/	Applied For
1 927	JASHINE DRIVE	26 927	JASM	WE DR	65-0284229		Not Applicable
Suite, Apt #	, etc.	Suite, Apt. #, etc.			5, Certificate of Status Desired	□ \$ ⁵	8.75 Additional Fee Required
City & State 3 DELRA	Y BEACH FL	City & State DELRAY	BEACH	, FL	Election Campaign Financing Trust Fund Contribution		5.00 May Be Added to Fees
Zip 4 3348	Country VSA	Zip 29 33483	30 Cou	ntry)SA	8. This corporation has liability for Florida Statutes	intangible tax u Yes 🔀 No	
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Re	glatered Ager	ıt
82 Street BOCA PATON FL 83481				82 Street Ad 92-7	Address (P.O. Box Number is Not Acceptable)		
				84 City DE		FL 85	33483
office or re	the provisions of Sections 607,0502 gistered agent, or both, in the State of Hamiliar with, and accept the obligat	of Florida. Such change was	s authorize	d by the corpor	rporation submits this statement for the pation's board of directors. I hereby accept	ourpose of cha of the appointm	nging its registered nent as registered
SIGNATURE 5	Ignature, typed or printed name of registered agent	and title if applicable. (N	OTE: Registere	Agent signature rec	ulred when reinstating)	DATE	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIR	ECTORS IN 12
TITLE	D	DELETE	1.1 TI	TLE		Į X I	Change
NAME	SPENGLER, ANDREW		12 N	ME			
STREET ADDRESS	530 NE 38TH 3T		1.3 \$1	REET ADDRESS	927 JASMINE DR	3210	
	-BOOA RATON FL	[] DELETE		TY-ST-ZIP	DELRAY BEACH, FL	3348	Change Addition
TITLE		[] DECEIE	2.1 Ti			L	Change (Addition
NAME			2.2 N/				
STREET ADDRESS				REET ADDRESS			
DITY-ST-ZIP TITLE		DELETE	3.1 TI	ITY-ST-ZIP	<u> </u>		Change Addition
NAME		_	3.2 N			_	•
STREET ADDRESS			3.3 \$1	REET ADDRESS			
CITY-ST-ZIP			3.4. C	ITY-ST-ZIP			
TITLE		DELETE	4,1 1	rl ē			Change Addition
NAME			4.2 N	AME			
STREET ADDRESS			438	REET ADDRESS			
CITY-S1-ZIP	···		4.40	TY-ST-ZIP			
TITLE		☐ DELETE	51 Ti	ł			Change Addition
NAME			5.2 N				
STREET ADDRESS			. It	REET ADDRESS			
CITY - ST - ZIP	·	T belete		TY-ST-ZIP			Change Addistr
TITLE		☐ DELETE	6.1 TI			البا	Change
NAME			6.2 N				
STREET ADDRESS				REET ADDRESS			
CITY-SI-ZIP	y partify that the information eunalised	with this filing done not our		TY-ST-ZIP	ed in Section 119.07(3)(i), Florida Statute	s I further nor	tify that the
information I am an off appears in	indicated on this arrual report or succer or director of the corporation or Block 12 or Block 13 I changed, of	pplemental annual report is the receiver or trustee emport on an attachment with an a	s true and i owered to d iddyess.	eccurate and the execute this rep	at my signature shall have the same legs ont as required by Chapter 607, Florida S	al effect as if m Statutes; and th	nade under oath; that nat my name