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

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S94886 (6) YOUNG DEVELOPMENT INC.						
Principal Place of Business 198 SEABROOK TEQUESTA FL 33469 US		Mailing Address 198 SEABROOK ROAD 210 TEQUESTA FL 33469-3032				
		US		3. Date Incorporated or Qualified 11/18/1991	3a. Date of Last Report 06/04/1996	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For	
Suite, Apt. #, etc.		Suite, Apt. #. etc.		65-0312186	Not Applicable \$8.75 Additional	
22 27				5. Certificate of Status Desired	Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be	
23 Z _i p	Country	2 8 Zip	Country	Trust Fund Contribution 8. This corporation has liability for it	Added to Fees	
24	25	29	30	Florida Statutes	Yes No	
	9, Name and Address of Curren	t Registered Agent	81 Name	10. Name and Address of New Re	stered Agent	
	ING, JOESPH G			YOUNG, JOSEPH G		
9112 ALTERNATE AIA SUITE 210			82 Street	Address (P.O. Box Number is Not Acceptable 198 SEABROCK	(e) 2. N	
	E PARK FL 33403		83			
			84 City_		FL 85 Zip Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named or				EQUESTA		
office or re agent. Lai	egistered agent, or both, in the State m familiar with, and accept the obliga	of Florida. Such change was	authorized by the corp	poration's board of directors. I hereby accep	t the appointment as registered	
SIGNATURE	Signature, typed or printed name of registered ago	nt and title if applicable (NO	TE: Registered Agent signature		DATE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFIC		
TIT'_E NAME	DPT YOUNG, JOSEPH G	☐ DELETE	1.1 TITLE 1.2 NAME		Change Addition	
STREET ADDRESS	9112 ALTERNATE AIA		1.3 STREET ADDRESS	198 SEABROOK RD		
CITY - ST - ZIP	LAKE PARK FL 33403		1.4 CITY - ST- ZIP			
TITLE		DELETE	2.1 TITLE		Change Addition	
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS			
CITY-ST-ZIP		DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE		Change Addition	
TITLE NAME		C) beccir	3.2 NAME		C change C vacation	
STREET ADDRESS			3.3 STREFT ADDRESS			
CITY-ST-ZIP			3.4. CITY - ST - ZIP			
TITLE		DELETE	4 1 TITLE		Change Addition	
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY - ST- ZIP			
TITLE		DELETE	5.1 TITLE		Change Addition	
NAME			5.2 NAME		ļ	
STREET ADDRESS			5.3 STREET ADDRESS		ľ	
CITY-ST-ZIP TITLE		DELETE	5.4 CITY-ST - ZIP 6.1 TITLE		Change Addition	
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			
CITY-ST-ZIP			6.4 CITY-ST-ZIP			
	ov certify that the information supplier	d with this filing does not qual		tated in Section 119.07(3)(i). Florida Statutes	I further certify that the	

information indicated on this annual report or supplemental annual report is frue 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, if on an appears with an address.

FILED

Feb 18 1997 8:00am

Secretary of State