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

PROFIT **CORPORATION** ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 15 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S96487

(1)

JEROME R. MILLER, P.A.

appears in Block 12 or Blo

**SIGNATURE** 

Principal Place	e of Business	Mailing Address				1 18831810 (10 f0 j) 8 823(1 8) 9184 (10)(1 818)(1 8) 918(1 8) 83(1 8) 18)(1 8)(1)(1)(1)(1)(1)(1)(1)			
1300 N FEDER	AL HWY	1300 N FEDERAL HWY							
SUITE 107		SUITE 107	SUITE 107						
BOCA RATON	FL 33432	BOCA RATON FL 33432-	BOCA RATON FL 33432-2848						
						3. Date Incorporated or Qualified 11/25/1991	1	ate of Last F <b>/05/1996</b>	Report
	ace of Business	2a. Mailing Address				4. FEI Number		1 1	pplied For
21)	11	26				65-0298209			lot Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc	1			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State	3	City & State	City & State			Election Campaign Financing \$5.00 May Be			
23		28				Trust Fund Contribution			to Fees
Zip	Country	Zip	Cou	untry		8. This corporation has liability for in	ntangible	tax under (	s. 199.032,
24	25	29	30	······				No	
	9, Name and Address of C	urrent Registered Agent		ļ <u>.</u>		10. Name and Address of New Reg	jiatered	Agent	
	LER, JEROME R.			81	Name				
	D N FEDERAL HWY			82	Street Add	ress (P.O. Box Number is Not Acceptab	le)		
	TE 107								
BOO	CA RATON FL 33432			83					
				84	City		FL	<b>85</b> Zip	Code
11. Pursuant I	to the provisions of Sections 60	7 0502 and 607 1508. Florida Statu	tes the a	have	a-named corr	poration submits this statement for the p	Urnoce o	f changing	ite registered
Office of re	egistered agent, or both, in the	State of Florida. Such change was obligations of, Section 607.0505, Fl	authorize	d by	the coroora	tion's board of directors. I hereby accep	t the app	pointment as	registered
SIGNATURE	Signature, typed or printed man e of regular								
12.	·····	S AND DIRECTORS	13.	d Age	nt signature requ	ired when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE CDC AND	O DIDECTO	DC IN 40
TITLE	PD	DELETE	1.1 T	ITI F	1	ADDITIONS/CHANGES TO OFFIC	ERS ANL	☐ Change	Addition
NAME	MILLER, JEROME R.		1.2 N					Ontainge	L Manton
STREET ADDRESS	1300 N FEDERAL HWY		1		ADDRESS				
CHY-ST-ZIP	BOCA RATON FL			ITY-S					
TITLE	\$	DELETE	2.1 TI		1-20			Change	Addition
NAME	MILLER, MARILYN		2.2 N						
STREET ADDRESS	1300 N FEDERAL HWY				AODRESS				
CITY-ST-ZIP	BOCA RATON FL				Í				
TITLÉ		DELETE	3.1 II		ST-ZIP			Change	Addition
NAME			3.2 N		-			LT Overigo	
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP					ST-ZIP				
TITLE		DELETE	4.1 II		SI TALL		<del></del>	Change	Addition
NAME			4.21					onange	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP				ITY-SI					
TITLE		DELETE	5.1 Ti		1-74			Change	Addition
NAME			5.2 N					eri Augusto	- Journall
STREET ADDRESS					ADDRESS				
CITY-\$1-7IP				INECT ITY-SI					
TITLE		DELETE	6.1 Ti		1 - ZIF			☐ Change	Addition
NAME			6.2 N					- visings	
STREET ADDRESS					ADDRESS				
CITY-ST-ZIP									
0111 01741			0.4 C	TY-\$1	1-20"				

14. Ido 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 indicated 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