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**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

COLINAENT # NOA

## **FILED** May 05 1997 8:00am Secretary of State

1. Corporation Name  E.M. &J. PRINCE, INC.  Principal Place of Business  Mailing Address  11170 CURRY DRIVE PALM BEACH GARDENS FL 33418  PALM BEACH GARDENS FL 33418						
				3. Date Incorporated or Qualified 12/31/1991	3a. Date of Last 11/04/1996	•
2. Principal	Place of Business	2a. Mailing Address		4. FEI Number		Applied For
21		26		65-0318377		lot Applicable
Suite, Apr	t. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired		Additional
22		27	····		Fee F	Pequired
City & Sta	ACC	City & State		6. Election Campaign Financing		D May Be I to Fees
Zip	Country	Zip	Country	Trust Fund Contribution  8. This corporation has liability for		
24	25	29	30		Yes No	6. 105.00£,
	g. Name and Address of Curr	ent Registered Agent		10. Name and Address of New Ro	egistered Agent	
	RNSTEIN, ALAN		81 Name			
4869-4 OKEECHOBEE BLVD.			82 Street Ad	ddress (P.O. Box Number is Not Accepta	ible)	
WŁ	EST PALM BEACH FL 33417		83			
			<u> </u>			
			<b>84</b> City		FL 85 Zip	Code
office or agent. I	t to the provisions of Sections 607.0 registered agent, or both, in the Sta am familiar with, and accept the obl	502 and 607.1508, Florida SI ste of Florida. Such change w ligations of, Section 607.0505	tatutes, the above-named covers authorized by the corpo b, Florida Statutes	orporation submits this statement for the oration's board of directors. I hereby acce		its registered is registered
office or agent. I SIGNATURE.	am familiar with, and accept the obl Signature, typod or printed name of registered.	agent and title if applicable.  ND DIRECTORS	6, Florida Statutes.  (NOTE: Registered Agent signature re		purpose of changing opt the appointment a DATE	DRS IN 12
agent I SIGNATURE 12.	am familiar with, and accept the obling street of registered.  OFFICERS A	ligations of, Section 607.0505 agent and title if applicable.	6, Florida Statutes  (NOTE Registered Agent signature re  13.  1.1 1ITLE	equired when reinstating)	purpose of changing ppt the appointment a	DRS IN 12
agent. I SIGNATURE 12. TITLE NAME	am familiar with, and accept the obling signature, typed or pented name of registered.  OFFICERS A  D PRINCE, JEFFREY	agent and title if applicable.  ND DIRECTORS	(NOTE Registered Agent signature re  13.  1.1 TITLE  1.2 NAME	equired when reinstating)	purpose of changing opt the appointment a DATE	PRS IN 12
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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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.