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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V17304

(9)

FILED Jan 30 1997 8:00 am Secretary of State

AFW, IN	C.				1	
					i ngeni annan manu haasa mihi bahii bidi	OHOM BABIL AND A BION BASIN BASIN HAD
Principal Place	of Business	Mailing Address			i išdin dindal tabat sanda tuni dania godi	BINNE BANK AINNI MENIT AFRIL ANNI 1981
140 INTRACOASTAL POINTE DR.		140 INTRACOASTAL POINTE	140 INTRACOASTAL POINTE DR.		·	
SUITE 305		SUITE 305	SUITE 305 JUPITER FL 33477-5094			
Jupiter Fl. 33477-5088 US		US US		3. Date Incorporated or Qualified	3a. Date of Last Report	
"					02/27/1992	01/30/1996
2. Principal Pl	ace of Business	2a. Mailing Address	······································		4. FEI Number	Applied For
21 26		26	6		65-03 16358	Not Applicable
Suite, Apt. #. otc. Suite		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
		27			Certificate of Olatos Desired	Fee Required
City & State		City & State			6. Election Campaign Financing	\$5.00 May Be
23	28		Country		Trust Fund Contribution	☐ Added to Fees
Zıp	—	Country Zip Country			8. This corporation has liability for it	ntangible tax under s. 199.032, Yes □ No
24	9. Name and Address of Current		30		Florida Statutes 22 10. Name and Address of New Reg	
ee.		The state of the s	81	Name	70, 110,110	
SELDIN, KEITH A. 140 INTRACOASTAL POINTE DRIVE						
SUITE 401			82	Street Ad	ddress (P.O. Box Number is Not Acceptab	le)
	ITER FL 33477		83			
1 300	HER I'L 30477					
ļ			84	City	•	FL 85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, t				-named c	orporation submits this statement for the p	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. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE	, , , , , , , , , , , , , , , , , , ,			•		
	Signature, typical or printed partie of registered ages	r and allo if applicable (NOTE	Registered Age	nt signature re	quired when reinstating)	DATE
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFIC	
TITLE	D DELETE		1.1 TITLE			Change Addition
NAME	ALIOTTA, ANTHONY F.		1,2 NAME			
STREET ADDRESS	140 INTRACOASTAL POINT D		1.3 STREET	1		
CITY - ST - ZIP	JUPITER FL DELETE		1.4 CITY~ST~ZIP 2.1 TITLE			Change Addition
TITLE	<u> </u>		2.1 TITLE 2.2 NAME			L Change Polition
NAME STREET ADDRESS	WALSH, JANET H	DIVE SHITE SUE		ADDDCCO		
	MINITER FI		2.3 STREET ADDRESS 2 4 CITY - ST - ZIP			
CITY-ST-74P	D D	DELETE	3.1 TITLE	11-217		Change Addition
NAME	BUSSEM, MARIE		3.2 NAME			
STREET ADDRÉSS	140 INTRACOASTAL POINTE DRIVE, SUITE 305		3.3 STREET	ADORESS		
CITY - ST - ZIP	JUPITER FL		34. CITY-8	ST-Z#P		
TITLE		☐ DELETE	4 1 TITLE			Change Addition
NAME			4. 2 NAME	İ		,
STREET ADDRESS			4.3 STREET	ADDRESS		
CITY-ST-ZiP			4.4 CITY-S	r-zip		
TITLE	☐ DELETE		5.1 TITLE			Change Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET	address		ļ
CITY-ST-ZIP			5.4 CITY - S	T-ZIP		
TITLE		☐ DELETE	6.1 TITLE	-		Change Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET	ADDRESS		
CITY-ST-ZIP			6.4 CITY - S	T-ZIP		

14. If 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 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 enangely or on an artifichment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

Director

1-12-71