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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V17734

(7)

Mailing Address

PETER P. STARSON, JR., P.A.

FILED
May 15 1997 8:00am
Secretary of State

	IAN IONI PROCE		

STE. 106 PLANTATION F		STE. 106 Plantation FL 33324-26				3. Date incorporated or Qualified	3a. Date of Lo	act Berort		
00		00				03/02/1992	08/12/19			
h	lace of Business	2a. Mailing Address				4. FEI Number		Applied For		
	T				, <u></u>	65-0391043		Not Applicable		
22		27	· · · · · · · · · · · · · · · · · · ·			5. Certificate of Status Desired	1 1 * -	75 Additional e Required		
City & State		28	28			8. Election Campaign Financing \$5.00 May 8e Trust Fund Contribution Added to Fees				
Z <sub>i</sub> p <b>24</b>	Country 25					This corporation has liability for in Florida Statutes	ntangible tax und Yes	der s. 199.032,		
	9. Name and Address of	of Current Registered Agent				10. Name and Address of New Reg	distered Agent			
STA	rson Jr., Peter P.			81	Name					
PLANTATION FL 33324 US  2. Principal Place of Business 26 Suite, Apt. #, etc. 27 City 8 State 28 Zip Country Zip 25 9. Name and Address of Current Registered Agent STARSON JR., PETER P. 8751 WEST BROWARD BOULEVARD SUITE 108 PLANTATION FL 33324  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statule office or registered agent, or both, in the State of Florida. Such change was a agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statule office of registered agent, or both, in the State of Florida. Such change was a agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statule office or registered agent, or both, in the State of Florida. Such change was a agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statule					Street Ad	ddress (P.O. Box Number is Not Acceptab	le)	·····		
				83						
			}	84	City		85	Zip Code		
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office or r	egistered agent, or both, in	the State of Florida. Such change was	authorized	d by	the corpor	orporation submits this statement for the paration's board of directors. I hereby accep	t the appointmen	nt as registered		
SIGNATURE							•			
10			TE Registered	J Age	nt signature rec	quired when reinstating)  ADDITIONS/CHANGES TO OFFIC	DATE EDG AND DIDEC	TODE IN 12		
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	by cortify that the informatio	a cumplied with this filing does not aug				ited in Section 119 07(3)(i). Florida Statute	s I further certify	that the		

I do hereby certify that the information supplied with this filling 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 efficer 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.

**SIGNATURE:** 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone