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 # **V26964**

(9)

1. Corporation GOSHAV	VKE CORPORATION				# # 19 11 # 19 11 # 19 11 # 19 11 # 19 1
Principal Place of Business Mailing Address 15961 ST CHARLES HARBOUR BLVD 791 WYE RD. FT MYERS FL 39708 AKRON OH 44333-2268 US					
				3. Date Incorporated or Qualified 3 04/07/1992	3a. Date of Last Report 02/14/1996
	ace of Business	2a. Mail ng Address		4, FEI Number	Applied For
21 79 W Suite, Apt 4		Suite. Apt. #, etc.	······································	65-0323829	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 AKRO ZID	い、OH Country	28	Country	Trust Fund Contribution	
₂₄ "H433		29	30	8. This corporation has liability for inter- Florida Statutes	
<u> </u>	9, Name and Address of Curi		1001	10. Name and Address of New Regis	
COR	PORATION INFORMATION SE	RVICES, INC.	81 Name		
	HAYS STREET		82 Street A	Address (P.O. Box Number is Not Acceptable)	
TALL	AHASSEE FL 32301			Total Control	
			B3		•
			84 City		85 Zip Code
	. Her remaining of Postions 607 C	t00 and 607 1500 Florida Cta	Nutes the shows parred	corporation cultimits this statement for the pure	FL 65 24 Code
office or re	egistered agent, or both, in the Sta	ate of Florida, Such change wa	as authorized by the corp	corporation submits this statement for the purp poration's board of directors. I hereby accept the	ne appointment as registered
	n familiar with, and accept the ob-	ligations of, Section 607.0505,	Florida Statutes		i
SIGNATURE	Signatini, typed or perfect and of registered	agent and the Tappocable (NOTE Registered Agent signature	required when reinstating) [DATE
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICER	
T-TLE	DVP	☐ DETELE	1.1 TITLE	D	Change Addition
NAME	MEYERSON, ROBERT F 16488 CAPTIVA ROAD		1.2 NAME	MEYERSON, ROBERT F.	
STEAT ADORESS	CAPTIVA ISLAND FL		1.3 STREET ADDRESS	16488 CAPTIVA RD	
CHY-ST-7IP TITLE	CP CP	TV DELETE	1.4 CITY - ST - ZIP 2 1 TITLE	DIP	Change Addition
NAME	SELDEN, PETER		2.2 NAME	MEYERSON, ADAM	
STREET ADDRESS	791 WYE RD.		2.3 STREET ADDRESS	191 WYE RO	
CHY-SL-ZIP	AKRON OH	,	2. 4 CITY-ST- Z IP	AKRON, OH HH333	
TILLE	\$	DELETE	3.1 TITLE	T.	Change Addition
NAME	KESSLER III H CHARLES		3.2 NAME	GOREK, KATHY	
STREET ACRONESS	791 WYE ROAD		3.3 STREET ADDRESS	191 WYE RD	
CITY - \$1 - 7(1)	arron oh VPT	I DOLLTE	3.4. CITY-ST-ZIP	AKRON, OH HH333	Change Addition
Tifuf	MURPHY ELIZABETH	DELETE	4 1 TITLE	D/VP/S	Change Addition
NAME OTOGER ANGEDICS	791 WYE RD		4. 2 NAME 4.3 STREET ADDRESS	MURPHY, RHZAIDETH	
STREET ADDRESS ONY-SEZIE	AKRON OH		4.4 CITY - ST - ZIP	791 WYE RO AKRON, OH 44333	
TULE		DELETE	5.1 TITLE	HOLON, VII	Change Addition
NAME			5.2 NAME		
STREE ADDRESS			5.3 STREET ADDRESS		
C Fr-S1-2P			5.4 CITY-ST-ZIP		
Tires		DELETE	61 TITLE		Change Addition
MN"			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CHY-\$1-7P 14 Ldo nevet	ny cort by that the information	l ed with this filing does not re	ealify for the exemption s	tated in Section 119.07(3)(i), Florida Statutes. I	further certify that the
raformation Lam an of	r indicated on this rinual report	r supplemental annual report or the receiver or trustee emp	is true and accurate and powered to execute this r	that my signature shall have the same legal ef eport as required by Chapter 607, Florida Stati	fect as if made under oath; that

SIGNATURE:

A LUNE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

712/97

330-666-6380

FILED

Feb 28 1997 8:00am

Secretary of State

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