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 # V27269

19	1
(~	į

FILED Jun 03 1997 8:00am Secretary of State

Change

Addition

___ Addit-on

Principal Place 120 43RD AVE SUITE F VERO BEACH		Mailing Address 120 43RD AVE SW VERO BEACH FL 32968-2382 US				· · · · · · · · · · · · · · · · · · ·						
US								3. Date Incorporated or Qualified 04/09/1992		te of Last Re 15/1996	oport	
2. Principal P	Place of Business		2a. Maring A	ddress				4. FEI Number] 04/ 1		plied For	
21			26					65-0330865		No	l Applicable	
Suite, Apt. #, etc.			State, Apt. #, etc.					5. Certificate of Status Desired		\$8.75 A		
City & State			City & State					6, Election Campaign Financing Trust Fund Contribution				
Zip	Co	untry	Zip	. [Coun	try		8. This corporation has liability for	intangible	tax under s.	199.032,	
24	25		29		30			<u>, </u>	Yes [
	9. Name and A DENICK, SAM W.	ddress of Currer	t Registered Age	nt		31	Name	10. Name and Address of New Re	gistered A	Agent		
120 43RD AVE. SW VERO BEACH FL 32968					82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City) 85 71p Code		
11. Pursuant office or agent. I a	to the provisions of registered agent, or am familiar with, and	Sections 607.050 both, in the State accept the oblig	2 and 607 1508, F of Florida. Such of ations of, Section 6	lorida Statulo hange was au 507,0505, Flor	s. the abouthorized rida Statu	DV6- by tos	named corporati	oration submits this statement for the p on's board of directors. Thereby accep	FL jurpose of of the appo		s registered registered	
	Signature typed or printed			HOM)		Agen	t sipeature require	oʻwlico reinstating)	DATE		 	
12.	PTD	OFFICERS AN		DELETE	13. 11 101			ADDITIONS/CHANGES TO OFFIC	ERS AND	Change	Addition	
TITLE NAME	TREDENICK, SA	M W	L	Trerrit						Change	L Addition	
NAME STREET ADDRESS	120 43RD AVE.				1.2 NAM		ADDRESS					
CITY-\$1-ZIP	VERO BEACH F				1.4 CITY		1				į	
TITLE		· 		DELETE	211111					Change	Addition	
NAME			-	=	2 2 NA						_ _	
STREET ADDRESS					ŧ		ADDRESS					
CITY-ST-ZIP	1				2 4 0 (1		·				'	
TITLE				DELETE.	311111					Change	Addition	
NAME					3.2 NAM	AI.						
STREET ADDRESS					3.3 SIR	ELTA	NDDRESS				ĺ	
CITY-ST-ZIP					3 4 CIT	Y- \$1	1-71P					
TITLE			С) DEVETE	4.1 THE	t				Change	Addition	
NAME					4. 2 NA	ΜE						

CITY-ST-ZIP 5.4 CITY - \$1 - 7/P 14. I do hereby certify that the information supplied with this fit ng does not quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. 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 eath, 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

4.3 STREET ADDRESS 4.4 CiTY+ S1_7iP

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST- ZIP

53.1016

5.2 NAMI

611111

6.2 NAME

STREET ADDRESS

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-\$1-ZIP

TITLE

NAME

TITLE

NAME

DELETE

DELETE