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**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

	JAL REPORT <b>1997</b>			ary of State CORPORATIONS	Secretar	ry of St	ate
DOCUMENT # V29804 (4) BEACHBAY HEALTH STAR, INC.					i jagil alfinin naja tajak anjin atak	ı Bigil gibil altıl algıl bigil	9( <b>)</b> () <b>)0</b> 1:
Principal Place of Business TWO MIRACLE STRIP LOOP SUITE 1 PANAMA PITY BEACH FL 32407			Mailing Address TWO MIRACLE STRIP LOOP SUITE 1 PANAMA OUTY BEACH FL 32407-3824		3. Date Incorporated or Qualified  3a. Date of Last Report		
Principal Pi	iace of Business	2	a. Mailing Address		04/20/1992 4. FEI Number	<b>04/06/1996</b> Ap	plied For
l		26	_1		59-3117632		t Applicable
Suite, Apt. 1	#. etc. 4 LISENBY	AVI= 27	Suite, Apt. #, etc.	NBY AVE	5. Certificate of Status Desired	\$8.75 A	
City & State			City & State		8. Election Campaign Financing	\$5.00	
PANA	MACITY COUNT		PANAMA	C/19 FCH	Trust Fund Contribution	Added to	
3240	05 25 1	3/74   29	32405	30 BAY		Yes No	199.032,
	<del></del>	ess of Current Reg	stered Agent	81 Name	10. Name and Address of New Re	gistered Agent	
	IVER, MICHAEL L MAGNOLIA AVE						
	IAMA CITY FL 3240	2-1365		82 Street Add	ress (P.O. Box Number is Not Acceptab	DIE)	
				83			
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1. Pursuant to	to the provisions of Sec egistered agent, or bot	ctions 607.0502 and h, in the Stale of Flo	607.1508, Florida Statu orida. Such change was	84 City lies, the above-named corporal authorized by the corporal	poration submits this statement for the pation's board of directors. I hereby accept	FL 65 Zip Courpose of changing its the appointment as	
agent Lar GNATURE	fur familiar with, and ac	cept the obligations he of registered agent and t	of, Section 607.0505, Fi	iles, the above-named cor authorized by the corpora lorida Statules.	ired when reinslating)	purpose of changing its the appointment as	s registered registered
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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 of Lam an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statules; and that my name appears in Block 12 or Block 13 of changed, or or an attachment with an address.

**FILED** 

May 09 1997 8:00am