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

**PROFIT** CORPORATION ANNUAL REPORT

1997

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V33940

(0)

FILED
Apr 25 1997 8:00am
Secretary of State

Principal Place of Business Mailing Address  \$300 UNIVERSITY DR. \$1E. #607 CORAL SPRINGS FL 33065				,		
US		US		<ol> <li>Date Incorporated or Qualified 05/01/1992</li> </ol>	3a. Date of Last Report 07/30/1996	
2. Principal P	lace of Business	2a, Mailing Address		4, FEI Number	Applied For	
	UNIVERSITY DR	26 3300 UNIVE	esity Or	65-0358522	Not Applicable	
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
22 <b>STE.</b> City & Stat	#514	27 <b>576</b> #514 City & State			Fee Required	
23 COK		28 CORAL SPR	INGS FL	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	Zip	Country	8. This corporation has liability for		
Zip 24 330	65 25 US		io US	Florida Statutes	☐ Yes 🗶 No	
		t Registered Agent	041 11-	10. Name and Address of New F	legistered Ağent	
	IDGE, RONALD V.	<b>†</b>	81 Nam Da	VIDGE ROWALD V.	,	
	9 NW 51 MANOR	ADORESS	B2 Street Ac	dress (P.O. Box Number is Not Accepted 9 NW 41 MANOX	able)	
COF	RAL SPRINGS FL 33065	CORECTION	83 71	DY NW 41 MANOR		
<b>V</b>		ONLY -				
		المالات المالات	84 City	A. Sa	FL 85 Zip Code 5	
44 10	4- M	0 and 007 1500. Flacing Class day		DRAL SPRINGS		
office or i	registered agent, or both, in the State	of Florida. Such change was au	thorized by the corpo	orporation submits this statement for the ration's board of directors. I hereby acc	purpose of changing its registered ept the appointment as registered	
agent. I a	m familiar with, and accopt the obliga	ations of, Section 607.0505, Flori	ida Statutes.	•		
SIGNATURE						
40	Signature, typed or printed name of registered ago OF LICERS ANI		flegistered Agent signature re	quired when reinstating)  ADDITIONS/CHANGES TO OFF	DATE	
12.	P	DELETE	1.1 TITLE	P ADDITIONS/CHANGES TO OFF	Change Addition	
NAME	DAVIDGE, RONALD V	Diperse	1.0 NIANIC	DAVIDGE, RONALD V.	•	
STREET ADDRESS	9139 NW 51 MANOR		1.3 STREET ADDRESS	9139 NW HI Wayne		
CITY-ST-ZIP	CORAL SPRINGS FL		1.4 CITY-S1-7IP	9139 NW41 MANOR CORAL SPRINGS, FL	3506-	
TITLE		DELETE	21 TITLE	STATE STATES, FE	Change Addition	
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREET ADORESS			
CITY-ST-ZIP			2. 4 City - St - 2iP			
TITLE		DELETE	3.1 TITLE		Change Addition	
NAME			3.2 NAME		-	
STREET ADDRESS			3 3 STREET ADDRESS			
CITY-ST-ZIP			3 4. CHY-SI-ZIP			
TITLE		DELETE	4.1 TITLE		Change Addition	
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE		DELETE	5.1 TITLE		Change Addition	
NAME			52 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		DELETE	6.1 TITLE		Change Addition	
NAME			6.2 NAME			
STREET ADDRESS			63 STREET ADDRESS			
CITY-ST-ZIP			6.4 C!TY - S1 - ZIP			
44 Lela bara	by partify that the information execution	durith this fiture does not availed	for the evention ate	tod in Section 119 07/3Y(i) Florida Statu	too. I down have need to the of the	

r oo nereby 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 offect 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 changed, or on an attachment with an address.