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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # \/34100

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FILED
May 05 1997 8:00am
Secretary of State

10267 N.W. 3	NGING PLACE, INC. Ice of Business If ST. NGS FL 33065	Mailing Address 10267 N.W. 31 ST. CORAL SPRINGS FL 33	3035-3914					
					3. Date Incorporated or Qualified 05/04/1992	3a. Date 09/27		eport
	Place of Business	2a, Mailing Address			4. FEI Number		<b></b>	plied For
Suito, Ap	t #, etc	Suite, Apt. #, etc.			65-0336354			ot Applicable Additional
22		27			5. Certificate of Status Desired		Fee Re	
City & Sta	ate	City & State			6. Election Campaign Financing	_	\$5.00	
23	Country	28     Z <sub>I</sub> p	Country		Trust Fund Contribution	<u> </u>	Added t	
70 24 <b>330</b>	26 25	29	30	i.	This corporation has liability for Florida Statutes	Intangible ia:		. 199.032,
	g. Name and Address of Curre				10. Name and Address of New Re	gistered Ag	ent	
	IGWAI, REYNOLD J.		81 Na	me				
	267 N.W. 31 ST.		B2 Str	eet Addre	ess (P.O. Box Number is Not Acceptat	ole)		<del></del>
CO	DRAL SPRINGS FL 33065		83		· · · · · · · · · · · · · · · · · · ·			
			<b>64</b>   Cit	y		FL	<b>85</b>   Zip (	Code
SIGNATURE		jeni and tille il applicable. (	NOTE Registered Agent sign		oration submits this statement for the pon's board of directors. I hereby accepted when telestating	DATE	<del></del>	
THLE			13.		ADDITIONS/CHANGES TO OFFIC	CERS AND D		
	P DEVMOUDE 1	DELETE	1.1 TITLE	T		CERS AND D	IRECTOR Change	RS IN 12
NAME CENTER AND OFFICE	P LINGWAI, REYNOLDS J		1.1 TITLE 12 NAME			CERS AND D		
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14. I do hereby 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 effect 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 on an attachment with an address.

SIGNATURE:

E AND TYPEN OR PRINTED NAME OF SIGNING

J LINGWA

3/25/97 (954)340-994

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