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 # V34586

1. Corporation Name

FLORIDA PAR INC.

(0)

	A K&U ING.							
Principal Plac	ne of Business	Mailing Address					ibre mani minit njasi bibit	81811 (4 8 1
429 CARRIAGE RD. SATELLITE BEACH FL 32937 429 CARRIAGE RD. SATELLITE BEACH FL 32937								
						3. Date Incorporated or Qualified 05/05/1992	3a. Date of Last 04/25/1996	Report
2. Principal Place of Business 2a. Mailing Address						4. FEI Number	I A	pplied For
21 26			were and the second			59-3122729	N	lot Applicable
Suite, Apt r=n	. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired		Additional
City & Sta	10	City & State				B Flattin Campian Figureins		Required
23	1157	28				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zip Country		Z(p				8. This corporation has liability for in		
24	25	29	30			Florida Statutes	Yes No	
	9. Name and Address of Curr	ent Registered Agent				10. Name and Address of New Reg	Jistered Agent	
	OBS, WILLIAM E.		8	1 Nam	е			
429 CARRIAGE RD.			8	2 Stree	t Addre	ddress (P.O. Box Number is Not Acceptable)		
SAT	ELLITE BEACH FL 32937		_	<u>_</u>				
			 B :	3				
			8	4 City			85 Zip	Code
11. Porenani	to the provisions of Sections 607 ()	502 and 607 1508. Florida Statu	tes the abo	ve-name	d coroc	ration submits this statement for the n	rpose of changing	its registered
office or	registered agent, or both, in the Sta	ite of Florida. Such change was	authorized I	by the co	orporation	oration submits this statement for the pron's board of directors. I hereby accep	t the appointment a	s registered
1	an la uniar with a la district the obj	igations of Section 607.0005, F	ionoa statut	5 8.			4/6/97	
SIGNATURE	Stantan, typed of the traine of registered OFFICERS A	agent and title Lapplicable (NO	TE: Registered A	gent signati	ure require	d when reinstating)	DATE	
12.	OFFICERS A	ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTO	RS IN 12
101.6	P DELETE		1 1 TITLE	1 1 TITLE			Change	☐ Addition
NAME	JACOBS, WILLIAM E.		1.2 NAM	1.2 NAME				
STREET ADDRESS	1		1.3 STRE	et address	s			
CHY-ST-7IP	SATELLITE BEACH FL		1.4 C(TY	-ST-21P				
TITLE	V DELETE		2.1 TITLE	2.1 TITLE			L Change	
NAME	TAYLOR, MARK		2.2 NAM	E	1			
STHEFT ADDRESS		IF 602	1	ET ADDRESS	S			,
CHY-ST-ZIP	MELBOURNE FL	☐ DELETE	2. 4 CITY	••••		·	Channe	1 Addition
TITLE	S BADZICK, RICHARD		3.1 TITLE		1		L_] Change	☐ Addition
NAME STATE LESS SECTION	AAA HADDOD OMI DIAM OVE AAA		3.2 NAMI	3.3 STREET ADORESS				
STREET ADDRESS	MELBOURNE FL	IL 008)			
DITY ST-7P	MLLDOORNE 1 C	DELETE	3.4. CITY 4.1 TITLE				Change	Addition
NAME			4. 2 NAM					
STREET ADDRESS				et address	5			
CHY-ST ZIP			4.4 CITY					
TILLE		DELETE	5.1 TITLE				Change	Addition
NAVI;			5.2 NAM	E				
STREET ADDRESS			5.3 STRE	et address	s			
(::1Y+S1+ZiP			5.4 CITY	- \$1 - ZIP			·	
TITLE	The state of the s	☐ DELETE	6.1 TITLE				Change	Addition .
N4M(6.2 NAM	E				
STREET ADDIRESS			6.3 STRE	ET ADDRESS	s	·		
CHIV. \$1.76			6 A CITY	CT 7ID	1			

14. I do heretry 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 il changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE:

Date

Daytime Finone 4

Daytime Finone 4

ANALYZO

Daytime Finone 4

FILED

Apr 14 1997 8:00am

Secretary of State