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

PROFIT CORPORATION ANNUAL REPORT

1997

AGBO, INC.



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V35352

(6)

FILED Mar 13 1997 8:00am Secretary of State

Principal Plac 2919 PONTE VI PONTE VEDRA			Mailing Address 2919 PONTE VEDRA BLVD. PONTE VEDRA BEACH FL 32082-4531						
us		UŜ		3. Date Incorporated or Qualified 3s. Date of Last Report 05/12/1992 02/09/1996					
2. Principal Place of Business 2a. Mailing Address						4. FEI Number	Vel		pplied For
21		26			59-3122474			ot Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75 Additional Fee Required				
City & State		City & State				6. Election Campaign Financing \$5.00 May Be			
23		28			Trust Fund Contribution Added to Fees				
Zip 24	Country 25	Zip Country			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes				
24]	9. Name and Address of Curre	29 ent Registered Agent	30			10. Name and Address of New Ro			
DAN	CIGER, AGNES E		1	81	Name	a chan ay a financia a sama a sama manana and a sama sama a sama a s	, I		
	PONTE VEDRA BLVD.		-	82 Street A		ress (P.O. Box Number is Not Accepta	ole)		
PON	TE VEDRA BEACH FL 32082		Ļ.						.
			['	03					
			[4	84	City		Fi	85 Zip	Code
11. Pursuant office or r agent. I a SIGNATURE						poration submits this statement for the tion's board of directors. I hereby acce	ourpose o	f changing i pointment as	ts registered registered
				: Registered Agent signature require 13.		DATE ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
12.	P OFFICERS AI	DELETE	1.5 TOL	F		ADDITIONS/CHANGES TO OFFI	JEHS ANI	Change	Addition
NAME DANCIGER, AGNES E		-		1.2 NAME					
STREET ADDRESS	2919 PONTE VEDRA BLVD.		1.3 STRFE1 ADDRESS						
CITY-ST-ZIP	PONTE VEDRA BEACH FL 32		1.4 CITY-ST-ZIP						
TITLE'		☐ DELETE	2.1 TITU					∐ Change	Addition
NAME STREET ADDRESS			2.2 NAN 2.2 CTB		LDDRESS	•			
CITY-ST-ZIP			2.4 CIT						
TITLE		DELFTE	3.1 TITLE					☐ Change	Addition
NAME			3.2 NAM	ΛE					
STREET ADDRESS					ODRESS				
CITY-ST-ZIP TITLE		DELETE	34. CMY-ST-ZIP DELETE 41 TITLE		-ZIP			Change	Addition
NAME				4. 2 NAME		•		[] Change	[1] Vacation
STREET ADDRESS		•			LDDRESS				
CITY-ST-ZIP			4.4 CITY			•			
TITLE	☐ DELETE		5.1 TiTL	5.1 TITLE				☐ Change	Addition
NAME			5.2 NAM	ΛE					
STREET ADDRESS			5.3 S1R	EE1 A	DDRESS				
CITY-ST-ZIP		DELETE	5.4 CITY-ST-ZIP		- ZIP			F 1 Channel	- Awares
TITLE NAME			6.1 TITL 6.2 NAM					☐ Change	Addition
STREET ADDRESS					DDRESS				
CITY-ST-ZIP			6.4 Ciln						
14. I do heret informatio	n indicated on this annual report or	supplemental annual report is	alify for the e true and ac	xem	iption state ale and tha	d in Section 119.07(3)(i), Florida Statute t my signature shall have the same leg- rl as required by Chapter 607, Florida S	al effect as	s if made un	ider oath; that