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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # V35525

1. Corporation Name

(7)

NOVA PROPERTIES, INC.

Principal Place of Business	- 1 1007 1410 1410 1410 1410 1410 1410 1410 1410 1410 1410 1410 1410 1410 1410								
1191 N. FEDERAL #116 DELRAY BEACH, F	#116				8 33. Date incorporated or Qualified	3a. Da			ort
DEBUGG FEE COMOC					05/12/1992 03/08/1996				
2. Principal Place of Business	2a. Mailing Address	3			4. FEI Number		T	Appli	ed For
1	26		-,-,-		59-3127401			Not /	Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc 27	o. 			5. Certificate of Status Desired			75 Add ee Requ	
City & State	City & State				6. Election Campaign Financing		\$5	.00 м	ay Be
3	28				Trust Fund Contribution		Ac	ded to	Fees
Zip Coun	try Zip		untry		8. This corporation has liability for			der s. 1	99.032,
4 25	29	30					No		
9. Name and Add	ress of Current Registered Agent		-		10. Name and Address of New Re	gistered /	Agient		
ann ananar			81	Name					
GARD, GEORGE	- TTT-T37		82	Street Addr	ess (P.O. Box Number is Not Acceptal	ole)			
1191 N. FEDER	(AL HWI.								
#116	00400		83						
DELRAY BEACH,	FL. 33483		84	City	· · · · · · · · · · · · · · · · · · ·		OF	Zip Co	
			~	l City		FL	85	zip co	46
 office or registered agent, or bo 	octions 607.0502 and 607.1508, Florida 5 oth, in the State of Florida. Such change occept the obligations of, Section 607.050	was authorize	ed by	y the corporat	poration submits this statement for the policion's board of directors. I hereby acce	ourpose of pt the appo	chang ointme	ing its r nt as re	egistered gistered
SIGNATURE Southern beyond or month of the	me of registered agent and title if applicable	(NOTE: Ranislare	d Ans	ent signature requir	red when reinstating)	DATE			
	OFFICERS AND DIRECTORS	13.	u Aye	in signature racion	ADDITIONS/CHANGES TO OFFIC		DIREC	CTORS	N 12
PSTD	DELET		ITLE				∐ Chi		Additio
NAME GARD, GEO	APGE	12 N	IAME					•	
	FEDERAL HWY. #116	i		ADDRESS					
1131 144				ST-ZIP					
INTE DEPKAL BI	EACH, FL. 33483			1-zir			T Cha	ange	Additio
NAME		2.2 N					<u> </u>		
STREET ADDRESS				ADDRESS					
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City-St-ZiP True	DELET			ST-ZIP			Cha	ลกสด	Additio
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NAME .		3.2 h		Labores					
STREET ADDRESS				ADDRESS					
CHY-SI-7.9	DELET			ST-ZIP		·	7776	0000	Additio
TIME	[] DELET			}			ı Uni	ange	LI AOGIGO
ALA LAC		■ # 21	DISTANCE		•				

14. If 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 minual 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 recently of trustee empowers 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 or the address.

4.3 STREET ADDRESS 4.4 CITY-ST-ZIP

5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

6.1 TITLE 62 NAME

SIGNATURE:

STREET ADDRESS

COLY - ST - ZIP

Cit (- \$1-7iP

STREET ADDRESS

THE

NAME STREET ADDRESS

THLE

NAME

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DELETE

DELETE

4-21-97

130.8848 Daylime Phone (

Change

Change

Addition

Addition

CR2E034 (9/9

FILED

Apr 25 1997 8:00am

Secretary of State

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