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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V52773 (1) LYONS CENTERS, INC.													
Principal Place of Business 19146 LYONS RD BOCA RATON FL 33434				Mailing Address 19146 LYONS RD BOCA RATON FL 33434-5536					I (REDIX DINOUT DINIO ARDAN HORN HORN HORN BIND BIND BIND BIND BIND BIND BIND BIN				
								ļ- 	Date Incorporated or Qualified 07/22/1992		ate of Last R 01/1996	eport	
2. Principal Place of Business				2a. Mailing Address					4. FEI Number			plied For	
Suite Apt. #. etc.				Suite, Apt. #, etc.					SR 75 Additional			t Applicable	
22			27						5. Certificate of Status Desired			equired	
City & Sta	te		28	City & State					Election Campaign Financing Trust Fund Contribution		\$5.00 Added		
Z(p 24	Country 25			Zip	Coun 30				8. This corporation has liability for intangible tax under s. 199. Florida Statutes X yes No			. 199.032,	
		and Address of Curre	nt Regis	tered Agent					10. Name and Address of New Re	gistered .	Agent		
JAIVEN, JACK 19148 LYONS RD BOCA RATON FL 33434						81 82 83	Name Street	Addres	s (P.O. Box Number is Not Acceptat	ole)			
						84 City				FL	85 Zip	Code	
11. Pursuant office or agent	t to the provis registered as	sions of Sections 607.050 gent, or both, in the State ith, and accept the oblic	02 and 6 e of Flori	07.1508, Florida Statu da. Such change was f. Section 607.0505, F	ites, the authoria	above zed by	e-named the corp	corpor poration	ation submits this statement for the pair is board of directors. I hereby accept		f changing in cointment as	ls registered registered	
SIGNATURE													
12.	Signature types	or printed name of registered ag OFFICERS AN					entengra Inc	e required	when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE FDS AND	DIRECTOR	C IN 12	
TITLE	D			DIRECTORS 13.				T	ADDITIONS/OFFICIALS TO OFFIC	LIIO MINE	Change	Addition	
NAME					1.2 NAME								
STREET ADDRESS	LU DALLA BEAGLE			1.3 STREET ADDRESS : 1.4 City - St - Zip				ŀ					
CITY - ST - ZIF TITLE	DP			DELETE 2.1 TI			iT-ZIP	ļ			Change	Addition	
NAME	1	MICHAEL S.			- 1	NAME		ĺ			_ •		
STREET ADDRESS				23 STRE			ADDRESS	Ì					
CITY-S1-7IP				D octor			ST-ZIP	ļ					
THEF	DVTS JAIVEN, JACK			☐ DELETE							Change	Addition	
STREET ADDRESS		YONS RD				2 NAME 3 STRFF1	ADDRESS						
City+St-ZiP		ATON FL 33434				4. CITY-:		1					
TITLE	٧			DELETE		TITLE]			Change	Addition	
NAME		HAROLD			4. 2 NAM								
STREET ADDRESS		YONS RD					ADDRESS					•	
CHY-ST-2IF TITLE	V	ATON FL 33434		DELETE		1 CITY-5 1 TITLE	T-ZIP				Change	Addition	
NAME	GEDDES	S, JAMES A.		the state of the s		2 NAME		1					
STREET ADDRESS	ADDRESS 19146 LYONS RD			and the second s		5.3 STREET ADDRESS		1					
CITY - ST - ZIP	BOCA F	IATON FL 33434			5.4 CITY-		T-21P	<u> </u>	······ +				
TITLE				☐ DELETE		6.1 TITLE		D			Change	X Addition	
NAME STOCET ADDOCCO								perin, Maurice					
STREET ADDRESS	ļ	^ -			SA CITY OT JID TA		Titora	Century Blvd.	2/17				
E(TY-SY-Z)P 14, I do hero	eby certify the	at the information supplie	d with th	nis filing does not qua	lify for the	he exe	mption E	tated in	t Palm Beach, FL 3 Section 119.07(3)(i), Florida Statute	3417 s. I furthe	r certify that	the	
informati Lam an l appears	ion indicated officer or dire in Block 12	on this applied report of ector of the corporation of or Block 13 if changed, o	supplem of the rec or on an	nental annual report is eiver or trustee empor attachment with an ac	true an wered to Idress	d acci o exec	rate and cute this	d that m report s	n Section 119.07(3)(i), Florida Statute y signature shall have the same lege is required by Chapter 607, Florida S	n effect a Statutes; s	s if made un ind that my i	der oath; that name	

SIGNATURE:

Jack Jaiven

n Director

(561)487-9630

FILED

May 14 1997 8:00am

Secretary of State

Lyons Centers, Inc.
Document #V52773
Additions to 1997 Corporation Annual Report

D
Halperin, Barry
100 Century Blvd.
West Palm Beach, FL 33417