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

**PROFIT** CORPORATION ANNUAL REPORT

1997

Principal Place of Business

311 S.W. 29TH TERRACE FT. LAUDERDALE FL 33312



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V54520

ANTHONY H. HARRISON, INC.

(4)

FT. LAUDERDALE FL 33312-2024

Mailing Address

311 S.W. 29 TERR.

## **FILED** Jan 14 1997 8:00am Secretary of State



		50		1	
				3. Date Incorporated or Qualified 3a. 07/27/1992 0	Date of Last Report 8/13/1996
	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21 360	O BROWRAD BLYD.	26 3115000	e Tear,	65-0344432	Not Applicable
Suite, Apt.	#, etc LAUDEADRLE	26 311 511 2 Suite Apt. #, etc. 27 ET: LRU	2D-	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State City & State				6. Election Campaign Financing	\$5.00 May Be
23 FL.		28 /= 4.		Trust Fund Contribution	Added to Fees
Zip 24 3-3	Country BROWARD.	プロ 29 333123	Country BRWD.	8. This corporation has liability for intangil Florida Statutes Yes	ole tax under s. 199.032,
	g. Name and Address of Current	Registered Agent		10. Name and Address of New Registers	d Agent
HARRISON, ANTHONY H.			81 Name		
311 S.W. 29TH TERRACE FT. LAUDERDALE FL 33312			82 Street Addr	82 Street Address (P.O. Box Number is Not Acceptable)	
			, , , , , , , , , , , , , , , , , , , ,		
			83		
			84 City		85 Zip Code
11. Pursuant	to the provisions of Sections 607 0502	and 607 1508. Florida Statutes	the above-named corr	poration submits this statement for the purpose	
office or r	registered agent, or both, in the State o im familiar with, and accept the obligati	l Florida. Such change was au	thorized by the corporat	tion's board of directors. I hereby accept the a	ppointment as registered
SIGNATURE	Signature, typed in protection and I houselined agent	and the factorisable (NOTE)	Registered Agent signature requir	red when reinstating) DATE	
12.	OFFICERS AND		I 13.	ADDITIONS/CHANGES TO OFFICERS A	
TITLE	PST	DELETE	1.1 TITLE	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	☐ Change ☐ Addition
NAME	HARRISON, ANTHONY H.		1 2 NAME		
STREET ADDRESS	311 S.W. 29TH TERRACE		13 STREET ADDRESS		
CITY+ST+ZIP	FT LAUDERDALE FL		1.4 CiTY - ST - ZIP		
THLE	VD	☐ DELETE	21 TITLE		Change Addition
NAME	HARRISON, ANTHONY H.		2.2 NAME		
STREET ADDRESS	311 S.W. 29TH TERRACE		2 3 STREET ADDRESS		
CITY-ST-ZF	FT LAUDERDALE FL		2 4 CITY - ST - ZIP		
TITLE		☐ DELETE	3 1 TITLE	····	Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY - ST - ZIP		E porte	3 4. C(TY - ST - Z(P	,	
TITLE		☐ DELETE	4 1 TITLE		Change Addition
NAME			4. 2 NAME	•	
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-7-P		Locuete	4.4 City - St - ZiP		Change   1 ages
TITLE		☐ DELETE	5.1 TITLE	•	Change Addition
NAME OTOGET ADDRESS			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
C17Y - \$1 - 71P		DELETE	5.4 CITY - ST - ZIP		Change Laddy
TiTLE		רון מברבוב	6 1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY OF DIO	1		C & OUTY OF THE		

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 for point on 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 of Block 13 or Block 15 or Blo

SIGNATURE:

DOFFRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1.6-97-5840460