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



Sandra B. Mortham

FILED May 08 1997 8:00am Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997			FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS			May 08 1997 8:00ar Secretary of State	
	DRIVE	 	(2) ng Address NW 60TH DRIVE A RATON FL 33496-40	 			
2. Principal Place of Business 21 Sulte, Apt. #, etc.		2a. Mailing Address 26 Suite, Apt. #, etc.				3. Date Incorporated or Qualified 09/21/1992	
City & State 23 Zip Country		28	City & State Zip Country			Fee Required F	
4214 SUIT BOO	9. Name and Address of Cu NNING, JON H. I NW 60TH DRIVE TE 900 A RATON FL 33496 To the provisions of Sections 607 agistered agent, or both, in the Section in the Section of Sections 607			es, the abouthorized	2 Streol A 3 City	10. Name and Address of New Registered Agent Address (P.O. Box Number is Not Acceptable) FL 85 Zip Code corporation submits this statement for the purpose of changing its registered oration's board of directors. I hereby accept the appointment as registered	
SIGNATURE	Signature, typed or printed name of registers		nplicable (NOTE			required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CHANNING, JOEL B. 4214 NW 60TH DR. BOCA RATON FL	S AND DIRECT	☐ DELETE	1.1 TALI 1.2 NAM 1.3 STRE		Change Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSTD CHANNING, JON H. 4214 NW 60TH DR. BOCA RATON FL	☐ DELETE		2 1 1/1L 2.2 NAM 2.3 STRE		Ton H. CHAMMING HELLY NW GOTE Drive BOCO TATION, FC 38496	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DOWN TOTAL TO		DELÉTE 3.3.3.3.			☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ DELETE	4.1 TITLE 4. 2 NAS	E Et address	Change Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		···	☐ DELETE	5.1 TITL 5.2 NAM 5.3 STRE		[] Change [_] Addition	
TITLE NAME			DELETE	6.1 TITL		Change Addition	

Information indicated on this annual report or supplemental annual report is true and total my signature shall have the same legal effect as if made under oath; that I am an officer or director of the co-position or the receiver of trustee empower of to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if the receiver of an attachment with as a process.