## 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 # **V73875** 

(9)

	A BONES, INC.						1 1911 EHER 1116 WUL 1814 ÜLST 1			
Principal Plac	o of Rusiness	Ma	ailing Address							
Principal Place of Business Mailing Address  1411 N FLAGER DR 1411 N FLAGLER DR						ļ				
STE 9800		ST	E 9900			1				
W PALM BCH	FL 33401		PALM BCH FL 33	3401 -3488				· · · · · · · · · · · · · · · · · · ·		
US		US	)				Date Incorporated or Qualified 10/23/1992	3a. Date of 04/16/1		port
2. Principal P	lace of Business	26.	Mailing Address	S	~ > ~		FEI Number	·	<del></del>	lied For
21 J935 Suite, Apt	LAKESHORE	Drive 26	1935 L Suite, Apt. #, et		e Driv	بو	65-0376515			Applicable
<u></u>	#, etc.	-	Suite, Apr. #, et	ic.		5.	Certificate of Status Desired	1 1 7	<b>8.75</b> Ad Fee Rec	
City & Stat		27	City & State				Floation Compaign Financing			
	auderdale !	FL 28	Ft. LA	userda	le FL		Election Campaign Financing  Trust Fund Contribution		<b>5.00 N</b> Added to	
Zip	Country		Zip	Cou		<del></del> -	This corporation has liability for			
24 33	326 25 U	5A 29	33320	30	ISA	I		Yes No		.00.002,
	9. Name and Addres	s of Current Regis	tered Agent			10.	Name and Address of New F	legistered Agen	it	
GOI	nia, betty r			•	81 Name	<u>~~~</u>	Ina Tarduan			
141	1 N FLAGLER DR				82 Street Ad	ddress (P.	O. Box Number is Not Accept	able)		
STE	9800				J. Directri	1935	O. Box Number is Not Accept	Drive	೭	
) WES	ST PALM BEACH FL 3	3401		:	83					
<b>1</b>					84 City			les	Tin C	odo -
						4.60	uderdale	FL  °°	33	3210
11. Pursuant	to the provisions of Section	ons 607.0502 and 60	07.150B, Florida	Statutes, the al	ove-named c	orporation	submits this statement for the	purpose of char	nging its	registered
office or r agent La	registered agent, or both, im familiar with, and acce	, in the State of Floric ept the obligations of	da. Such change L_Section 607.05	e was authorize 605, Florida Stat	d by the corpo utes.	bration's b	submits this statement for the oard of directors. I hereby acc	ept the appointm	nent as re	egistered
	7.1									
SIGNATURE	\ <b>b</b> M	W o C	Rudsa					4-4-6	77	
SIGNATURE	Signature, typed or printed frame	of registered agent and talo	rides		1 Agent signature re	equired when	reinstating)	4-4-C	17	·
SIGNATURE		W O	Mudst If applicable CTORS	(NOTE Registered	I Agent signature re	equired when	reinstating) DDITIONS/CHANGES TO OFF	DATE ICERS AND DIR	) / ECTORS	IN 12
	OF OF	of registered agent and title FICERS AND DIREC	Mudst if applicable	(NOTE Registered 13.	I Agent signature re	equired when A	reinstating) DDITIONS/CHANGES TO OFF	DATE  ICERS AND DIR	17	·
12.	P FELDMAN, GRETCH	of registered agent and title HICERS AND DIRECTION	Mudst If applicable CTORS	(NOTE Registered	I Agent signature re	equired when A	reinstating) DDITIONS/CHANGES TO OFF	DATE  ICERS AND DIR	) / ECTORS	IN 12
12.	P FELDMAN, GRETCH 3450 E. FLETCHER	of registered agent and title HICERS AND DIRECTION	Mudst If applicable CTORS	(NOTE Registered 13. TE 1.1 TI 1.2 N	I Agent signature re	PRES I	reinstaing) DDITIONS/CHANGES TO OFF  DENT  - PRESTIA  - ARCHU WOLF, MI  - Waldemark St	DATE ICERS AND DIR	) / ECTORS	IN 12
12. TITLE NAME	P FELDMAN, GRETCH 3450 E. FLETCHER TAMPA FL	of registered agent and title HICERS AND DIRECTION	Happlicable CTORS  DELE	(NOTE Registers- 13. TE 1.111 1.2 NJ 1.3 SI 1.4 CI	I Agent signature re LE AME REET ADDRESS LY-ST-21P	PRES I MARY	reinstand) DDITIONS/CHANGES TO OFF  DENT  THE PRESTIA  WAIDENERS MI  WAIDENERS MI  SOTA FLORIDA	DATE ICERS AND DIR  H 610 34239	ECTORS Change	IN 12 Addition
12. UTLE NAME STREET ADDRESS	P FELDMAN, GRETCH 3450 E. FLETCHER TAMPA FL TD	of registered agent and title HICERS AND DIRECTION	Mudst If applicable CTORS	(NOTE Registere- 13. TE 1.1 TI 1.2 NJ 13 SI 14 CI	I Agent signature re  LE  ME  REET ADDRESS  IY-ST-2IP	PRESI MARY 10 AC 10 21 Sara	reinstand) DDITIONS/CHANGES TO OFF  DENT  T PRESTIA  WOLDENCE ST  SOTA FLORIDA  PRESTIDENT	DATE ICERS AND DIR  H 610 34239	) / ECTORS	IN 12
12. UTLE NAME STREET ADDRESS CITY-ST-ZIP	P FELDMAN, GRETCH 3450 E. FLETCHER TAMPA FL TD GONIA BETTY	of registered agent and tile FICERS AND DIRECTION AVE., \$350	Happlicable CTORS  DELE	(NOTE Registers- 13. TE 1.111 1.2 NJ 1.3 SI 1.4 CI	I Agent signature re (LE AME REET ADDRESS IY-ST-2IP	PRESI MARVIO AC 1921 Sara VICE	reinstating) DDITIONS/CHANGES TO OFF  DENT  T PRESTIA  TAIREW WOLF, MI  WOLDENACE ST  SOTA FLORIDA  PRESTICENT  CHIC ROSS	DATE ICERS AND DIR  H 610 34239	ECTORS Change	IN 12 Addition
12. VILE NAME STREET ADDRESS CITY - ST - ZIP TITLE	P FELDMAN, GRETCH 3450 E. FLETCHER TAMPA FL TD GONIA BETTY 1411 N FLAGLE DR	of registered agent and tile FICERS AND DIRECT	Happlicable CTORS  DELE	(NOTE Registered 13. TE 1.1 TI 1.2 NO 1.3 SI 1.4 CI TE 2.1 TI 2.2 NO 1.3 SI 2.3	I Agent bignature re ILE ME REET ADDRESS IY-ST-2IP ILE ME	PRESTA MARY 10 AT Sara VICE Laur 130	reinstand) DDITIONS/CHANGES TO OFF  DENT  T PRESTIA  Waldemere St  SOTA FLORIDA  PRESTIDENT  CHE ROSS  JFK DRIVE # 2	DATE ICERS AND DIR  H 610 34239	ECTORS Change	IN 12 Addition
12. VILE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	P FELDMAN, GRETCH 3450 E. FLETCHER TAMPA FL TD GONIA BETTY	of registered agent and tile FICERS AND DIRECT IEN AVE., #350	d applicable CTORS  DELE	(NOTE Registered  13. TE 1.11 1.2 NV 1.3 S1 1.4 CI TE 2.1 TI 2.2 NV 2.3 S1 2.4 CI	I Agent bignature re LE ME REET ADDRESS IY-ST-ZIP LE ME REET ADDRESS IY-ST-ZIP IT-ST-ZIP	PREST MARY 19 AT 19 AT 1	reinstand) DDITIONS/CHANGES TO OFF  DENT  T PRESTIA  TATEW WOLF, MI  WOLDENERS ST  SOTA FLORIDA  PRESTIGENT  TETTE ROSS  JFK DRIVE # 2  ntis FL. 33446	DATE  ICERS AND DIR  CONTROL  CONTROL	1 7 ECTORS Change	IN 12 Addition Addition
12. UTLE NAME STREEL ADDRESS CITY: \$1-74P TITLE NAME STREEL ADDRESS	P FELDMAN, GRETCH 3450 E. FLETCHER TAMPA FL TD GONIA BETTY 1411 N FLAGLE DR	of registered agent and tile FICERS AND DIRECT IEN AVE., #350	Happlicable CTORS  DELE	(NOTE Registered  13. TE 1.1 TI 1.2 NV 1.3 SI 1.4 CI TE 2.1 TI 2.2 NV 2.3 SI 2.4 CI	I Agent signature ve  ILE  ME  REET ADDRESS  IY-ST-ZIP  LE  ME  REET ADDRESS  IY-ST-ZIP  LE  ME	PRESTA HAR- 10 Ar 10 Ar	reinstaing) DDITIONS/CHANGES TO OFF  DENT  TARCESTIA  TARCESTIA  MAIDEMERIC  SOTA FLORIDA  PRESIDENT  ettc. ROSS  JFK DRIVE # 2  ntis FL. 3344;	4-4-C  DATE  ICERS AND DIR  C	ECTORS Change	IN 12 Addition
12. UTLE NAME STREEL ADDRESS CITY-ST-ZIP TITLE NAME STREEL ADDRESS CITY-ST-ZIP	P FELDMAN, GRETCH 3450 E. FLETCHER TAMPA FL TD GONIA BETTY 1411 N FLAGLE DR	of registered agent and tile FICERS AND DIRECT IEN AVE., #350	d applicable CTORS  DELE	(NOTE Registered  13. TE 1.11 1.2 NV 1.3 S1 1.4 CI TE 2.1 TI 2.2 NV 2.3 S1 2.4 CI	I Agent signature ve  ILE  ME  REET ADDRESS  IY-ST-ZIP  LE  ME  REET ADDRESS  IY-ST-ZIP  LE  LE	PREST HARY 10 AT SATA VICE LAUT 130 A AHON	reinstand)  DDITIONS/CHANGES TO OFF  PRESTIA  A PRESTIA  Waldemere of  SOTA FLORIDA  PRESTDENT  CETIC ROSS  JEK DRIVE # 2  INTER  SUITER  TO TAITHUONIO	01 2	1 7 ECTORS Change	IN 12 Addition Addition
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12.  1:TLF  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  TITLE  TITLE	P FELDMAN, GRETCH 3450 E. FLETCHER TAMPA FL TD GONIA BETTY 1411 N FLAGLE DR	of registered agent and tile FICERS AND DIRECT IEN AVE., #350	If applicable  CTORS  DELE	(NOTE Registeree  13. TE 1.11 1.2 NJ 13 SI 14 CI TE 2.11 2.2 NJ 2.3 SI 2.4 C 3.1 TI 3.2 NJ 3.3 SI 3.4 C TE 4.1 TI 4.2 N	I Agent signature ve  ILE  ME  REET ADDRESS  IY-ST-ZIP  LE  ME  REET ADDRESS  IYY-ST-ZIP  LE  ME  REET ADDRESS  IYY-ST-ZIP  LE  ME  TY-ST-ZIP  LE  ME	A HOLL TREAS 3300 435 435	reinstand) DDITIONS/CHANGES TO OFF  DEAT  A PRESTIA  Maldemere ST  SOTA FLORIDA  PRESIDENT  CETTE ROSS  JFK DRIVE # 2  ntis FL. 33446  SUITEF  TO TARDUNO  LAKESHORE DI	DATE  ICERS AND DIR  H 610  34239  OI  2  IV C  33324	ECTORS Change Change	Addition  Addition
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12.  13 ILE NAME STREET ADDRESS CITY ST-ZIP TITLE NAME STREET ADDRESS CITY ST-ZIP	P FELDMAN, GRETCH 3450 E. FLETCHER TAMPA FL TD GONIA BETTY 1411 N FLAGLE DR	of registered agent and tile FICERS AND DIRECT IEN AVE., #350	d applicable CTORS DELE  DELE	(NOTE Registeree  13. TE 1.11 1.2 NJ 13 SI 14 CI TE 2.1 TI 2.2 NJ 2.3 SI 2.4 C 3.1 TI 3.2 NJ 3.3 SI 3.4 C TE 4.1 TI 4.2 NJ 4.3 SI 4.4 CI	I Agent signature re  ILE  ME  REET ADDRESS  IY-ST-ZIP  ILE  ME  REET ADDRESS  ITY-ST-ZIP  ILE  ME  REET ADDRESS  ITY-ST-ZIP  ILE  AME  REET ADDRESS  IY-ST-ZIP  ILE  AME  REET ADDRESS  IY-ST-ZIP  ILE  AME	A HOLL TREAS 3300 435 435	reinstand) DDITIONS/CHANGES TO OFF  DEAT  A PRESTIA  Maldemere ST  SOTA FLORIDA  PRESIDENT  CETTE ROSS  JFK DRIVE # 2  ntis FL. 33446  SUITEF  TO TARDUNO  LAKESHORE DI	01 2 33324	ECTORS Change Change Change	Addition  Addition  Addition
12.  TILE NAME STREET ADDRESS CITY-ST-ZIP TITLE	P FELDMAN, GRETCH 3450 E. FLETCHER TAMPA FL TD GONIA BETTY 1411 N FLAGLE DR	of registered agent and tile FICERS AND DIRECT	d applicable CTORS DELE  DELE	(NOTE Registeres  13.  11. 11  1.2 N  1.3 S1  1.4 CI  TE  2.1 TI  2.2 N  2.3 S1  2.4 C  TE  3.1 TI  3.2 N  3.3 S1  3.4 C  TE  4.1 TI  4.2 N  4.3 S1  4.4 CI  TE  5.1 TI  5.2 N	I Agent signature re  ILE  ME  REET ADDRESS  IY-ST-ZIP  ILE  ME  REET ADDRESS  ITY-ST-ZIP  ILE  ME  REET ADDRESS  ITY-ST-ZIP  ILE  AME  REET ADDRESS  IY-ST-ZIP  ILE  AME  REET ADDRESS  IY-ST-ZIP  ILE  AME	A HOLL TREAS 3300 435 435	reinstand) DDITIONS/CHANGES TO OFF  DEAT  A PRESTIA  Maldemere ST  SOTA FLORIDA  PRESIDENT  CETTE ROSS  JFK DRIVE # 2  ntis FL. 33446  SUITEF  TO TARDUNO  LAKESHORE DI	01 2 33324	ECTORS Change Change Change	Addition  Addition  Addition

6.4 CITY-SI-ZIP

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 corporation 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 if changed, or on an attachment with an address.

61 TITLE

6.2 NAME 6.3 STREET ADDRESS

SIGNATURE:

THLE

STREEL ADDRESS

GNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

DELETE

4.4.97

303-829-5524 Daytime Phone \*

Change

Addition

**FILED** 

Apr 08 1997 8:00am

Secretary of State