FILE NOW: FILING FEE IS \$61.25	FILE	NOW:	FILING	FEE IS	S \$61.	.25
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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996		
DOCUMENT #	73360	

(7)

1. Corporation	E Of Business WE BLVD.	Mailing Address 3180 BISCAYNE BLVD. MIAMI FL 33137				
					3. Date incorporated or Qualified 08/15/1975	3a. Date of Last Report 10/23/1995
 1	ace of Business	2a. Mailing Address			4. FEI Number	Applied For
Suite, Apt.	# olc	26		· · ·	59-1627141	Not Applicable
22		Suite, Apt. #, etc.			5. Certificate of Status Desired	XKI \$8.75 Additional Fee Required
City & State		City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25	Zip 29	Country 30		This corporation has liability for int Florida Statutes	-·
	9. Name and Address of Curr	ent Registered Agent			10. Name and Address of New Re	
			81	Name		
	, MATTHEW		82	Street Ada	ress (P.O. Box Number is Not Acceptable)
	SCAYNE BLVD					·
, MIAMI F	L 33137		83			
•			84	City		85 Zip Code
11 / Pursuant t	to the provisions of Sections 617 050	27 and 617 1500 Flatide Otal A		L	ration submits this statement for the purpo	
SIGNATURE _	Signature typed or printed name of rugistered age	ction 617.0505, Florida Statutes.	TE: Registeren Agen			DATE
THE	PD OFFICERS A	DELETE	13.		ADDITIONS/CHANGES TO OFFIC	
NAME	GISSEN, MATTHEW	Dotter	1.1 TITLE 1.2 NAME			Change Addition
STREET ADDRESS	3180 BISCAYNE BLVD.		1.3 STREET	Anneses		
CITY-ST-ZIP	MIAMI FL		14 CITY - S			
TITLE	SD	DELETE	2 1 TITLE	· · · · · · · · · · · · · · · · · · ·		Change Addition
NAME	LIEBERMAN, HENRY		2.2 NAME			•
STREET ADDRESS	20220 HIGHLANDS LAKES		23 STREET	ADDRESS		
CITY - ST - ZIP	NORTH MIAMI BEACH FL 3 VD		2 4 CITY - S	ST-ZIP		
THTLE	SILVERMAN.IRWIN	DELETE	3 1 TITLE			Change Addition
NAME STORES ADDODGO	10365 SW 96TH ST		3 2 NAME			
STREET ADDRESS CITY-ST-ZIP	MIAMI FL		3 3 STREET			
TITLE	mravii i E	DELETE	3.4 CITY-S 4.1 TIFLE	T - ZIP		
NAME		Detter	4 2 NAME			Change Addition
STREET ADDRESS			4 2 NAME 4 3 STREET	ADDRESS	50000181 -05/13/96010 ***70.00	7515
CITY-ST-ZIP			44 CHY-S	l l	-05/13/96010	1000 17
TITLE		DELETE	5 1 TITLE		*** <i>(</i> 0.00	☐ Change ☐ Addition
NAME			5.2 NAME			
STREET ADDRESS			5 3 STREET	ADDRESS		
CITY-ST-ZIP			5 4 CITY-SI	r- ZIP		
TITLE		☐ DELETE	6 1 TITLE			Change Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET	ADDRESS		× /0 ۱ سیر
CITY-ST-ZIP	contity that the information as making	with this files is a later at a first	64 CITY-ST	· ZIP		<u>5-1-96 0</u>
oath; that		oration or the receiver or trustee	iai report is trui : emnowered tr		or the exemption stated in Section 119.07 te and that my signature shall have the sai s report as required by Chapter 617, Florid	

BIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR MATTHEW GISSEN SIGNATURE:

305-573-3784 Daytine Phone # April_30, 1996

CR2E037 (12/95)