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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # J02942

(7)

FILED
May 07 1997 8:00am
Secretary of State

SARI J.	CORP.				
% ANDREW SOCOL % ANDR 17001 NE 8TH AVE. 17001 N		Mailing Address % ANDREW SOCOL 17001 NE 6TH AVE. NORTH MIAMI BEACH FL	33162-2408		
			¢.	3. Date Incorporated or Qualified 03/10/1986	3a. Date of Last Report 05/01/1996
2. Principal F	Place of Business	2a. Mailing Address		4. FEF Number 59-2707772	Applied For
Sulte, Apt. #, etc.		Suite, Apt. #, etc.			Not Applicable
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for	or intangible tax under s. 199.032.
24	25 9. Name and Address of Current	29 Registered Agent	30	Florida Statutes 10. Name and Address of New F	Yes 15 No
800	COL, ANDREW		81 Name	IU. Name and Plantage of Hell I	inglotorest Agent
2011 NORTHEAST 211TH STREET 82 Street Add			dress (P.O. Box Number is Not Accept	able)	
NOI	RTH MIAMI BEACH FL 33179		83	· · · · · · · · · · · · · · · · · · ·	
			84 City		FL 85 Zip Code
11. Pursuant office or	to the provisions of Sections 607 0502 registered agent, or both, in the State c	and 607.1508, Florida Statu If londa Such change was	tes, the above-named cor authorized by the corpora	poration submits this statement for the ation's board of directors. I hereby acc	purpose of changing its registered ept the appointment as registered
agent. La	am familiar with, and accept the obligat	ions of Section 607.0505, F	forida Statutes.		
SIGNATURE	Signature typed or printed name of registered agent	and the diapplicable (NO	H. Registered Agent signature requ	ured when reinstring)	DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFF	
TITLE NAME	D SOCOL, ANDREW	∐ DELETE	1.1 11116		Change Addition
STREET ADDRESS	2011 NE 211TH STREET		1.2 NAML 1.3 STREET ADDRESS		
CITY-ST-ZIP	NORTH MIAMI BCH FL		1.4 CHY- \$1- ZP		
TITLE	VD	DELETE	2.1 TITLE		Change Addition
NAME	SOCOL, IRIS		2.2 NAME		
STREET ADDRESS	2011 NE 211TH STREET NORTH MIAMI BCH FL		2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	ST ST	DELETE	2. 4 CPY - \$1 - 7\P 3 1 TOLE		Change Addition
NAME	SOCOL, STUART		3.2 NAME		•
STREET ADDRESS	2011 NE 211TH ST		3.3 STREET ADDRESS		
CITY-ST-ZIP	N MIAMI BCH FL	NILITE	3.4 CHY-\$1-ZIP		Chart
TITLE NAME		L DELETE	4.1 TITLE 4.2 NAME		Change Addition
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST. ZIP		
TITLE		DELETE	5 1 TITLE	AMAZZA MILITARIA DA PARA MANA MANA MANA MANA MANA MANA MANA M	Change Addition
NAME			5.2 NAME		-
STREET ADDRESS			5 3 STREET ADDRESS		
CITY-ST-ZIP TITLE		DETETE	5.4 CHY-51-28P 6.1 THLE		Change Addition
NAME		בן ייינינינ	6.2 NAME		Change (T Worldon)
STREET ADDRESS			6.3 STREET ADORESS		
CITY-ST-ZIP			6.4 C-TY - S1 - ZIP		
44 Late here	by portify that the intermedian county ad-	The state of the s	de la facilità accompande de la	allia Caratina 440 (17/0)/(). I tantala Cara-	

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 amount report or supplied each air made under oath; that I am an officer or director of the corporation or the record or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if charged, or on a statute human with an address.

CIONATURE.

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