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PROFIT CORPORATION ANNUAL REPORT

1997



LLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L87066

(1)

MELINDA S. STRAUSS, OTR, INC.

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Mar	13	1997	8:00am
Se	crei	tary o	f State



3010 NORTH 34TH STREET HOLLYWOOD FL 33021	Mailing Address 3010 NORTH 34TH : HOLLYWOOD FL 33			F TOOLIGHT BOR FRITT FROM BOILD BITTO BIRL GIBIT BIRL GIBIT OF HE CONTROL HEALT HOOL		
				<ol><li>Date Incorporated or Qualified 07/12/1990</li></ol>	3a. Date of L 05/17/19	
2. Principal Place of Business.	2a. Mailing Addres 26	s	· · · · · · · · · · · · · · · · · · ·	4. FEI Number 65-0207956		Applied For Not Applicable
Sade Apt #1010	Suite, Apt. #, et	tc.		5. Certificate of Status Desired		75 Additional se Required
Osy & Stare 23	City & State			6. Election Campaign Financing Trust Fund Contribution		.00 May Be
	шту <b>7</b> ф	30 Cou	ntry	8. This corporation has liability for i		
9. Name and Ad	ddress of Current Registered Agent	1301		10. Name and Address of New Re		
STRAUSS, MELINDA			B1 Name		<u> </u>	
3010 NORTH 34TH S' HOLLYWOOD FL 330	TREET		82 Street Add	dress (P.O. Box Number is Not Acceptab	ole)	
		ļ	83			
		ļ	84 City		FL 85	Zip Code
SIGNATORE departs the terminal re-	COLLICERS AND DIRECTORS	(NIDTE Hegistered	Agent signature req	ured when reinstating)	DATE DIDEC	TORS IN 12
PD STRAIGG MEI	INDA C	TE 11TI)		ADDITIONS/CHANGES TO OFFIC	Cha	
STRAUSS, MEL	INDA S. 4th street	TE 11 TO 1,2 NA 1,3 ST	ME REET ADDRESS	ADDITIONS/CHANGES TO OFFIC		
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To exercity serving a more insurnation application ining does not quality for the exemption stated in Section 119 0/(3)(i). Florida Statutes i further certify that the information in a satisfaction of the proposal cannot be sometimed in the same legal effect as if made under oath; that I are calculated on the composal cannot be incorrectly in the proposal cannot be more very configure empowered to execute this report as required by Chapter 507, Florida Statutes; and that my name appears in Florida Statutes in the charge of order an attention with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIBECTOR

3/8/97

954 96 asy