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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

\$ 105,00

FILED

Feb 13 1997 8:00am

Secretary of State

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # M13741

(7)

C 7 DAVMENTS INC

U.Z. PATMENTS, INC.						
Principal Place of Business	Mailing Address	· · · · · · · · · · · · · · · · · · ·			JII BIBIL BIBIL BIBIL BIBIL BIBIL BIBIL	
9900 STIRLING RD., SUITE 201 COOPER CITY FL 33024 9900 STIRLING RD., SUITE COOPER CITY FL 33024-8		20 1 55				
				3. Date Incorporated or Qualified 04/09/1985	3a. Date of Last Report 02/06/1996	
2. Principal Place of Business	2a. Mailing Address			4. FEI Number	Applied For	
21	26	····		59-2514842	Not Applicable	
Suite, Apt. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	City & State			6. Election Campaign Financing		
23	28				\$5.00 May Be Added to Fees	
Zip Country	Zip	Country	,	8. This corporation has liability for int	· · · · · · · · · · · · · · · · · · ·	
24 25		30			Yes No	
	Current Registered Agent	-	1 1.7	10. Name and Address of New Regi	stered Agent	
LIPSCHITZ, PAMELA		81	Name			
9900 STIRLING RD., SUITE 201			Street Ac	reet Address (P.O. Box Number is Not Acceptable)		
COOPER CITY FL 33024		83			-	
į.		84	City		FL 85 Zip Code	
11. Pursuant to the provisions of Sections	607.0502 and 607.1508, Florida Statute	s, the abov	e-named co	orporation submits this statement for the pur		
agent I am familiar with, and accept the	ne obligations of, Section 607.0505, Floi	rida Statute	y the corpo s.	ration's board of directors, I hereby accept	the appointment as registered	
SIGNATURE Lamela					<i>411019</i> 7	
Signature, typed or profesioname of reg			ent signature re	quired when reinstating)	DATE	
TITLE DV	ERS AND DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO OFFICE	Change Addition	
NAME ZIMET, CONNIE	than Determ	1.2 NAME	1			
STREET ADDRESS 961 N.E. 152 ST.			T ADDRESS	BU MO JOULEUR	€	
CITY-ST-ZIP MIAMI FL		1.4 CITY-5	' '	Plantetial. FL 33524	.	
TITLE	DELETE	2.1 TITLE	J1 L3		Change Addition	
NAME ZIMET, RUBY E.		2.2 NAME				
STREET ADDRESS 961 N.E. 152 ST.		2.3 STREET	ADDRESS	EZT NO TAMTERIA	æ	
CITY-S1-ZIP MAMI FL		2. 4 CITY-	ST-ZIP	Montation. Fl. 3830	24	
TITLE	DELETE	3.1 TITLE			☐ Change ☐ Addition	
NAME UPSCHITZ, PAMELA		3.2 NAMÉ	1			
"STREET ADDRESS 11364 S.W. 58TH ST.		3.3 STREE	T ADDRESS	•		
CITY-ST-ZIP COOPER CITY FL		3.4. CITY -	ST-ZIP			
TITLE	DELETE	4.1 TITLE		•	Change Addition	
NAME		4 2 NAME	- 1			
STREET ADDRESS		4.3 STREE				
CITY-ST-ZIP TITLE	DELETE	4.4 City - 5 5.1 Title	SI-ZIP		Change Addition	
NAME	becare				Fit cuante Fit vocilion	
STREET ADDRESS		5.2 NAME 5.3 STREE	LANDBEEC			
-City-St-7IP		5.4 CITY - S	1			
Title	DELETE	6.1 TITLE	21.71		Change Addition	
NAME	-	6.2 NAME				
STREET ADERESS			LANNESS			

6.4 CITY-ST-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 43 if changed, or on an attachment with an address.

CITY-ST-ZIP