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Mar 24 1997 8:00am  
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # M33354 (5)  
1. Corporation Name  
NEW LIFE INVESTMENTS INC.



Principal Place of Business

Mailing Address

2999 N.E. 191 ST.  
SUITE 804  
N. MIAMI BEACH FL 33180  
US

~~O/O HUGHES SILVERS & GLASSMAN~~ Delete this Line  
1140 KANE CONCOURSE 5TH FLOOR  
BAY HARBOR ISLANDS FL 33154-2045  
US

3. Date Incorporated or Qualified 06/09/1986  
3a. Date of Last Report 02/20/1996

2. Principal Place of Business

2a. Mailing Address

4. FEI Number 59-2693937  
Applied For Not Applicable

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

5. Certificate of Status Desired  \$8.75 Additional Fee Required

22 City & State

27 City & State

6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees

23 AVENTURA FL

28 City & State

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

24 Zip 33180

29 Zip Country

30 Zip Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SILVERS, ROBERT HENRY  
~~O/O HUGHES SILVERS & GLASSMAN~~ Delete this Line  
1140 KANE CONCOURSE 5TH FLOOR  
BAY HARBOR ISLAND FL 33154

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent or both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE DATE (NOTE: Registered Agent's signature required when reinstating)

Table with 12 rows and 2 columns: OFFICERS AND DIRECTORS. Includes fields for Title, Name, Street Address, City, St, Zip. Row 1: D SCHLECHT, ARTHUR, 2999 NE 191 ST #804, N MIAMI BCH FL.

Table with 12 rows and 2 columns: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Includes fields for Title, Name, Street Address, 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 13 if changed, or on an attachment with an address.

SIGNATURE: Arthur Schlecht 3/17/97 305-864-7531  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E034 (9/96)