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

PROFIT CORPORATION ANNUAL REPORT

1997

**DOCUMENT # M35692** 



FLORIDA DEPARIMENT OF STATE

## Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

(6)

## FILED Mar 24 1997 8:00am Secretary of State

Protopol File 66 W FLAGLE MIAM! FL 3313	EL INVESTMENT COMPANY OF OFFENSIONS OF ST 5TH FLOOR 30	Mailing Address 66 W FLAGLER ST 5TH MIAMI FL 33130-1807	FLOOR	<b></b>					
US		US				3. Date Incorporated or Qualified		te of Last	
						07/23/1986	05/0	1/1996	
· 1	Parter of Rusiness	2a. Mailing Address				4, FEI Number		<del>}</del>	Applied For
<b>21</b>     Suite Adt	M. sat	[26]				59-2698535			Not Applicable
1	. # 150	Saite, Apt. #, etc.				5. Certificate of Status Desired			Additional Required
<b>22</b> ] - Oity & 5ta	!	City & State				6. Election Campaign Financing			May Be
23		28				Trust Fund Contribution		Adder	d to Fees
Zq)	Country	Zφ	Count	ry		8. This corporation has flability for	intangible i		
24	25	29	30				Yes [		
	9. Name and Address of Curr	rent Registered Agent	8	- T	None o	10. Name and Address of New Re	gistered A	gent	
	AMS, R. WADE		ľ		Name				
86 W FLAGLER ST, 5TH FLOOR MIAMI FL 33130				82 Street Addr		ss (P.O. Box Number is Not Acceptat	ole)		
MILT	IMIL OO IOU		8:	3			-		
								·	
			8	4 '	City		FL	<b>85</b> Zip	o Code
11. Posasal of a 6 or agent 1.	Flothe provisions of Sections 007 0 registered agent, or bold, in the Stranfaction with, and accept the ob-	/502 and 607 1508, Florida Statale of Florida Statale of Florida Such change was hybitions of, Section 607 0505,	lutes, the abo s authorized t Florida Statuti	vo-r by thes.	named corpo he corporatio	ration submits this statement for the prin's board of directors. I hereby accept	ourpose of of the appo	changing pintment a	its registered is registered
SiGNATURI	in the standing correspondence in a substituting density	acontraca bije v tenderalde (184	Off. Bag stored A	arınt	Signature recorded	i when reinstating)	DATE		,
12.		AND DIRECTORS	13.	-		ADDITIONS/CHANGES TO OFFIC		DIRECTO	RS IN 12
Test	<b>D</b>	DELETE	1.1 TILLE					Change	Addition
MALE	ADAMS, LAMAR		1.2 NAME	:					
\$100 12 000 35	66 W FLAGLER ST 5TH FLO	POR	1.3 STH	ET AL	DRESS				
(5 x SL7≥	MIAMI FL		1.4 CHY-	-51	ZIP				
1111		[] DELETE	2 1 TITLE					L Change	Addition
NAMI			2.2 NAME						
59651 A109651			2.3 STRE						
1000 St 72 1001		DÉLE ÎE	2 4 City 3 1 Title		Z(P			Change	Addition
NAMI		Ell otterie	3 2 NAME					Change	L Roundy
500[ELA 006]V			3.3 STREE		ODRESS				
(1 × \$1 Ze)			34 CHY						
Till F		DELETE	4 1 TITLE					Change	Loddition
HALE			4. 2 NAM	ŀ					
SHRELY HOUSE			4.3 \$1R5	ET AD	ODRESS				
O Y 9-70			4.4 CHY-	SI .	ZIF				
\$-1- <b>}</b>		DELETE	5 1 THEE					Change	Addition
HMM			5.2 NAME						
\$666.13,06653			5.3 STRE	E I AE	DDRESS				
(2.6.2) 1.5.			5 4 CHY-		ZIP			<del></del>	
168		☐ DELETÉ	6 1 TIFLE					Change	Addition
NAMI			6.2 NAME						ļ
Shirt Allibra			6 3 STHE						
COY SELECT			6.4 CHY-	- SL .	ZIF'				1

14. I districtive the information supplied with this firing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicinated on this acmual report or supplemental arrival report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an office of director of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in 655 k 12 or floor. 33 if changed, or on an attachment with an address.

SIGNATURE:

Lamar) M. Adama SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR 10/97 (30s)371-3333