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

PROFIT
CORPÓRATION
ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M43404

(6)

ANDROS GROUP INCORPORATED

	1	'

|--|--|

FILED

Jun 11 1997 8:00am

Secretary of State

Principal Plac	e of Business	Mailing Address			ALBIT BIGIT BIGIT SERTI AIGIT GIBIT ING T
C/O JONATHAN H. WARNER TOI BRICKELL AVENUE. SUITE 1800 MIAMI FL 33131 US		1330 CORAL WAY #103 MIAMI FL 33145-2933 US			
				3. Date Incorporated or Qualified 12/17/1986	3a. Date of Last Report 03/12/1996
	lace of Business	2a. Mailing Address	3.7	4, FEI Number	Applied For
21 - 10	00 Brickell Avenue	26 1000 Bricke	II Avenue	59-2797356	Not Applicable
Sulte, Apt.	#.etc. ui te 1200	Suito, Apt. # etc. 27 Suite 1200	•	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat		City & State		6. Election Campaign Financing	\$5.00 May Be
	ami, FL	28 Miami, FL		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for i	ntangible tax under s. 199.032,
24 331		29 33131 3	o Dade	Florida Statutes 10. Name and Address of New Re	Yes No
4474	9. Name and Address of Current	майненью удеця	81 Name	10. Name and Address of New Re	gistered Agent
	RNER, JONATHAN H.			Brad R. Shepherd, Senio	r P <u>rop</u> erty Manager
	NW ST AVE., 11TH FLOOR		82 Street /	Address (P.O. Box Number is Not Acceptab	le)
MIAI	MI FL 33128-8817		83	<u>1000 Brickell Avenue, S</u>	uite 1200
			B3		
			84 City	Miami	FL 85 Zip Code 33131
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508, Florida Statutes	the above-named	corporation submits this statement for the p	urpose of changing its registered
ottice or r agent. I a	registered abent, or both, in the State o im familia with, and ⊈ccept the obligati	ir ⊱iorida. Such change was au i ⊱ ns of, Section 607,0505, Flori	morized by the corp da Statutes.	poration's board of directors, I hereby acces	the appointment as registered
SIGNATURE	/ LAARC				
	Signs use lyped or printed name of indistered agent		Registered Agent signature		DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICE	
TITLE	PD DEMETRIA	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	TINIACOS, DEMETRIO		1.2 NAME		
STREET ADDRESS	1330 CORAL WAY #103		1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL	Decem	1.4 CITY - ST - ZIP		
TITLE	TINHACOO ECCEDATIA O DE	☐ DELET E	2.1 TITLE		Change Addition
NAME	TINIACOS, EFSTRATIA C DE		2.2 NAME		
STREET ADDRESS	1350 CORAL WAY #103		2.3 STREET ADDRESS	- 1	•
CITY-ST-ZIP	MIAMI FL	Posess	2. 4 CITY - ST - ZIP		
TITLE	S TIMBACOS ALCIAMODO	☐ DELETE	3.1 TITLE		Change Addition
NAME	TINIACOS, ALEJANDRO		3.2 NAME		
STREET ADDRESS	1330 CORAL WAY #103		3.3 STREET ADDRESS		
CITY-ST-ZIP	IAMI FL	Depte	34. CITY-ST-ZIP		[0 [1.12]
TITLE		☐ DELETE	4.1 117LE		L Change L Addition
NAME			4. 2 NAME		•
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		T 65 FTC	4.4 CiTy - ST - ZiP		Coherent Charge
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		Decry	5.4 CITY - ST - ZIP		Obser- Laden
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			64 City-St-78P		i

14. I do hereby certify that the information supplied with this filling 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 eath; that if 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 the light 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 the light of the corporation of the c

_.___

years OHILL Merrayon There a