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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF

ATE Sandra B. Morthar

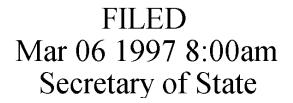
Secretary of State DIVISION OF CORPORAT

DOCUMENT # M45361

(6)

GREENWALD & GLAUSER, P.A.

Principal Place of Business	Mailing Address	
10840 SW 113 PLACE	12910 S.W. B4TH ST	





10840 SW 113 F MIAMI FL 33178 US		12910 S.W. B4TH ST Miami FL 33183-4320 US					
					3. Date Incorporated or Qualified 01/23/1987	3s. Date of Las 03/29/199	
2. Principal Pla	ice of Business	2a. Mailing Address			4. FEI Number		Applied For
21		26			59-2770763		Not Applicable
Suite, Apt. #	, etc.	Suite, Apt. #, etc.			6. Certificate of Status Desired		5 Additional Required
City & State		City & State			6. Election Campaign Financing Trust Fund Contribution		May Be ed to Fees
Zip 24	Country 25	Zip 29	Count 30	ry		Yes No	r s. 199.032,
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Re	gistered Agent	
GLAL	JSER, STUART H.		8	1 Name			
	0 SW 84 STREET 11 FL 33183		8	2 Street	Address (P.O. Box Number is Not Acceptate	ole)	
****			8	3			
				4 City			ip Code
11. Pursuant to office or repagent. Lam	o the provisions of Sections 607.05 gistered agent, or both, in the Stati i familiar with, and accept the oblig	02 and 607.1508, Florida Statut e of Florida. Such change was a gations of, Section 607.0505, Fla	es, the abo authorized orida Statut	ve-named by the corr es.	corporation submits this statement for the population's board of directors. I hereby acception	ourpose of changin of the appointment	g its registered as registered
SIGNATURE							
5	grafula Typed or protect name of registered ag			gent signature	e required when reinstating)	DATE	
12.	OFFICERS AN	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE		
TOLE	D	DELETE	1.1 TITLE			[_] Chang	e 🔲 Addition
NAME	GLAUSER, STUART H.		1 2 NAM	E			
STREET ADDRESS	12910 SW 84TH STREET		1.3 STAE	et address			
CITY-SI-ZIP	MIAMI FL	- No. com	1.4 CiTY				
TITLE	D	☐ DELETE	21 TITLI			∐ Chang	e 🔲 Addition
NAME	GREENWALD, DANIEL		2.2 NAM	E			,
STREET ADDRESS	12910 SW 84 ST		2.3 STR	ET ADDRESS			
CHY-SI-ZIP	MIAMI FL	DELETE		· ST-ZIP			
THILE		DELETE	3.1 T∤TL			Chang	ge 🗌 Addition
NAME [3.2 NAM				
STREET ADORESS				et address			
CHY-ST ZIP		Driete		'-ST-ZIP		[] C5	no Edditor
THILE		☐ DELETE	4.1 TITU			L Chang	ge 🔲 Addition
NAME			4. 2 NAN		{		Į
STREET ADDRESS		•		ET ADDRESS			į
City - St - ZiP		DELETE	4.4 CITY 5.1 TITL	-ST-ZIP		☐ Chan	je 🔲 Addition
TITLE		C) precit	5.3 THU			L1 com	Jo L. Muddidii
NAME CAMES AND GOOD							Į
STREET ADDRESS				ET ADDRESS			
TITLE		DELETE	6.1 TITL	-ST-2IP		Chang	je 🔲 Addition
		C) ottert			d d	L Vitali	- Lighthon
NAME			6.2 NAM				
STREET ADDRESS			1	ET ADDRESS			1
CITY - \$1 - ZIP	and he that the information areas.	ad with this filing doce not quali		-ST-ZIP	tated in Section 119.07(3)(i). Florida Statute	e I further cortify th	ant the

I form a second the composition of the composition of the exemption stated in Second 113.07(3)(1), Florida Statutes. 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 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 an an attact meg with an address.

SIGNATURE:

05/271-6600