ANN	NONPROFIT DRPORATION NUAL REPORT 1996 JMENT # N	25 (IF DISSOLVED, N	FLORIDA DE Sanc Sec DIVISION (EPARTMENT of the B. Mortha cretary of State OF CORPOR.	OF STATE am te					
MON	NTEGO BAY HOMEON OUNTY		(4) CIATION, INC	,)E		 	iat illaid afilia illal.	ic contrato) dia (1)	
•	ace of Business	Mai	iling Address				HEALTH HARA			
9916 SW 21 P. O. BOX 7 MIAMI FL 33		P.	9916 SW 218 TERRACE P. O. BOX 700756 MIAMI FL 33170							
	Place of Business	2a. i	Mailing Address				02/15/198-			f Last Report 1/29/1995
978 Suite, Apt	<u>80 SW Z16.</u>	51. 26	9780	SW	216	<u>ST.</u>	4. FEI Number 59-277454	13		Applied For Not Applicab
2		27	Suite, Apt. #, etc.				5. Certificate of Status			8.75 Additional
City & State	AHI FL.	28	City & State Y/AM1,	FL			6. Election Campaign Trust Fund Contribu	Financing	\$	Fee Required 5.00 May Be
zió 433/	190 25 US	A 29	2 3 19 C)	Coun	ntry USF	1	Trust Fund Contribu 8. This corporation has Florida Statuton	s liability for in	tangible tax u	Added to Fees inder s. 199.032,
	9. Name and Address o	of Current Register	red Agent				Florida Statutes 10. Name and Address		Yes No	1
	E, ROBERT			L	81 Name 82 Street	•				
2151 L Suite					82 Street	Adores	(P.O. Box Number is N	ot Acceptable)	
					33]				 -	 .
CORAL	L GABLES FL 33134				B4 City					
CORAL	,	617,0502 and 617	1508, Florida Statu			~oorati	a hmite this stateme	1 the paire	FL 85	Zip Code
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