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

PROFIT CORPORATION ANNUAL REPORT

1997

**SIGNATURE** 



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 24 1997 8:00am

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Jan 18/97 (305)256.6478

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P31964

(0)

CROSSBOW ENTERPRISES LTD., INC.

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Principal Place of Business Mailing Address						T SAMELANDER AND LONG HILLS AND SHORE IN THE SAME SAME SAME SAME SAME SAME SAME SAM	OSOSI KIKIS OSOSI C	//	#{ <b>#</b>	1
15601 SW 63R		15601 SW 83RD AVE.				1				
MIAMI FL 3315	7	MIAMI FL 33157-2254								
					•	3. Date Incorporated or Qualified	3a. Date o	Last Re	eport	<del></del> -
						11/29/1990	05/01/			
2. Principal Pl	ace of Business	2a. Mailing Address				4. FEI Number	1	<del></del>	plied Fo	or
21		26				58-1898271		No	t Applic	able
Suite, Apt	#, etc.	Suite: Apt. #. etc.				5. Certificate of Status Desired	□ \$	8.75		al
22		27						Fee Re	quired	
City & State	2	City & State				6. Election Campaign Financing		\$5.00		
<b>23</b> } Zip	Country	<b>28</b>	Cou	intry	·	Trust Fund Contribution		Added t		*************************
24	25	29 30				8. This corporation has liability for intangible tax under s. 199.03 Florida Statutes			199.03	<i>,</i> ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
	9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent				
BALLESTEROS, IVAN G.					Name				***************************************	
15601 SW 83RD AVE.				82	Street Addr	dress (P.O. Box Number is Not Acceptable)				
	MI FL 33157				COLOUR MICHIGA (1.40. DON MICHIGA IS NOT WORKING)					
				83	,					
				84	City		8	5 Zip (	Code	
							FL "	200		
11. Pursuant I	to the provisions of Sections 607.05	602 and 607,1608, Florida Sta	tutes, the al	bove d b	e-named corp	oration submits this statement for the p ion's board of directors. I hereby accep	urpose of cha	inging its	s register	ered
agent. La	m familiar with, and accept the obli	gations of, Section 607.0505,	Florida Stat	tutes	S.	ion a board of directors. Thereby becop	и ию цррони	nont as	registeri	
SIGNATURE								<del></del>		
12.	Signalizati genzionenti el finazioni regidenti a Officiale A	gertand talk i happiscable (N ND DIRECTORS	IOTE Registerer	o Age	ant signature requir	red when reinstating)  ADDITIONS/CHANGES TO OFFICE	DATE PERS AND DIE	PECTOR	25 IAI 29	;
TITLE	P	DELETE	1.1 11	 TI E		ADDITIONS OF TAXABLE TO GITTE		Change	Add	
NAM:	BALLESTEROS, IVAN		1,2 N/							
STREET ADDRESS	15601 SW 83RD AVE.		1.3 S1	TREET	ADDRESS					
CITY - S1 - ZIP	MIAMI FL		1.4 CI	ITY-S	ST - ZIP					
THTLE	ST	DELETE	2.1 Ti	TLE				Change	Add	ldition
NAME	BALLESTEROS, INES L.		2.2 N	AME						
STREET ADDRESS	15601 SW 83RD AVE.		2.3 S1	TAEET	ADDRESS					
CITY - ST - 7IP	MIAMI FL	···	2.40	ITY-	ST-ZIP					
TOTLE		L DELETE	3111					Change	Add	ldition
NAVÉ .			3.2 N	AME						
STREET ADDRESS			3 3 S1	TREET	ADDRESS					
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NAME control resource			4 2 N							
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NAME			5.2 N							
STREET ADDRESS					I ADDRESS					
City-St-ZiP					ST-ZIP					
TITLE		DELETE	6.1 TI					Change	Ad	dition
NAME			6.2 N	AME				,		
CIDECT ADDRESS					TADDRESS					

64 CITY-ST-ZIP

14. If do hereby certify that the information supplied with the filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statules. I further certify that the information indicated on this 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 effection of the convertion or the receiver or trustee impowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 in Changed for on an attachment with the address.