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Mailing Address 12300 N.W. 32 AVE.

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

SIGNATURE:

12300 N.W. 32 AVE.



FLORIDA DEPARTMENT OF STATE

FILED

Mar 11 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9200008539 (8)

THE JEFFREY FUTERNICK COMPANY

MIAMI FL 3310	5 <i>/</i>	MIRMI PL SSIOPERIO					
		•			3. Date Incorporated or Qualified 12/02/1992	3a. Date of Las 04/23/199	
2. Principa P	hace of Business	2a. Mailing Address			4. FEI Number	L	Applied For
21		26			65-0374844		Not Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	, , , , , , , , , , , , , , , , , , , ,	'5 Additional ∍ Required
City & Stati	e	City & State			6. Election Campaign Financing		00 May Be
23	1 6		Countr		Trust Fund Contribution		led to Fees
Zip TTI	Country			y	8. This corporation has liability for in Florida Statutes	ntangible tax unde Yes	er s. 199.032,
24	25 9. Name and Address of Curren		30		10. Name and Address of New Rec		
EI IT	TERNICK, JEFFREY	Tropiotorou rigent	61	Name	10, Hambara Adalasa Si Haw Ha	Jioloi Ga Pagorit	
	00 N.W. 32 AVE.						
	00 N.W. 32 AVE. MI FL 33167		62	Street Add	fress (P.O. Box Number is Not Acceptab	le)	
,,,,,,			, 83		· · · · · · · · · · · · · · · · · · ·		
			84	City		85 2	Zip Code
				l		FL	
11. Fursuarit office or r agent. La	to the provisions of Sections 607.050 registered agent, or both in the State im familiar with, and accept the obliga	2 and 607.1508, Florida Statute of Florida. Such change was au ations of, Section 607.0505, Flor	s, the abov uthorized b rida Statute	re-named cor y the corpora is.	poration submits this statement for the patients board of directors. I hereby acceptions	urpose of changir it the appointment	ig its registered i as registered
SIGNATURE	Sequence types or pointed move or registron mag-	ANOTIC THE PROPERTY OF THE PARTY OF THE PART	Florent And A		uired when reinstating)	DATE	
12.	OFFICERS AN		13.	leur signature requ	ADDITIONS/CHANGES TO OFFIC		TORS IN 12
Total F	PDS	DELETE	1.1 TITLE	·····		☐ Chan	
NAME	FUTERNICK, JEFFREY		1.2 NAME				
STREET ADDRESS	12300 NW 32ND AVE.		1.3 STREE	T ADDRESS			
C/TY - S1 - ZiP	MIAMI FL		1.4 CITY-	ST-ZIP			
THTLE		DELETE	2.1 TITLE			☐ Chan	nge 🔲 Addition
NAME			2.2 NAME				
STREET ADDRESS			2.3 STREE	T ADDRESS			
C(1) - \$1 - 2)P			2. 4 CITY	-S1 - 21P			
THILE .		DELETE	3 1 TITLE			Chan	nge 🔲 Addition
NAME			3 2 NAME				
STREET ADDRESS			3.3 STREE	T ADDRESS			
CITY-S - 7IP			3.4. CITY	ST-ZIP			
TOTLE		☐ DELETE	4.1 TITLE			☐ Chan	ige 🔲 Addition
NAME			4. 2 NAMI				
STREET ACORESS			4.3 STREE	T ADDRESS			
CITY- ST- ZIP			4.4 CITY-	ST-ZIP			
TITLE		☐ DELETE	5.1 TITLE			Chan	nge 🔲 Addition
NAME			5.2 NAME				
STHELL ADDRESS			5.3 STREE	T ADDRESS			
City-St-Zik			5.4 CITY -	ST-ZIP		· ·····	
TITLE		☐ DELETE	6.1 TITLE			Chan	nge 🔲 Addition
NAME			6.2 NAME	ļ			
STREET ADORESS			6 3 STREE	T ADDRESS			

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3)(i). Florida Statutes. I further certify that the information in dicated on this annual report or suppliemental 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 othere or director of the corporation or thoreceiver or trusted 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 on an attachment with an address.