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Mar 25 1997 8:00am
Secretary of State

PROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000070744 (6)

1. Corporation Name
CTSP ENTERPRISES, INC.



Principal Place of Business

2400 E LAS OLAS BLVD
FT LAUDERDALE FL 33301

Mailing Address

2400 E LAS OLAS BLVD
FT LAUDERDALE FL 33301-1529

3. Date Incorporated or Qualified
10/05/1993

3a. Date of Last Report
05/14/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

4. FEI Number

65-0453015

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

LAVENDER, JOEL R
507 SE 11TH CT
FT. LAUDERDALE FL 33316

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

Signature of registered agent or officer (if applicable)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	DPVS	DELETE
NAME	CORREA, VIVIAN	
STREET ADDRESS	2400 E LAS OLAS BLVD	
CITY-ST-ZIP	FT LAUDERDALE FL 33301	
TITLE	T	DELETE
NAME	CORREA, VIVIAN	
STREET ADDRESS	2400 E LAS OLAS BLVD	
CITY-ST-ZIP	FT LAUDERDALE FL 33301	
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	DAES	Change	Addition
1.2 NAME	VIVIAN CORREA		
1.3 STREET ADDRESS	2400 E LAS OLAS BLVD		
1.4 CITY-ST-ZIP	FT LAUDERDALE FL 33301		
2.1 TITLE	V. PRUS	Change	Addition
2.2 NAME	LOUISA MARCHECO		
2.3 STREET ADDRESS	2400 E LAS OLAS BLVD		
2.4 CITY-ST-ZIP	FT LAUDERDALE FL 33301		
3.1 TITLE	TREAST SECT	Change	Addition
3.2 NAME	TOMY CORREA		
3.3 STREET ADDRESS	2400 E LAS OLAS BLVD		
3.4 CITY-ST-ZIP	FT LAUDERDALE FL 33301		
4.1 TITLE		Change	Addition
4.2 NAME			
4.3 STREET ADDRESS			
4.4 CITY-ST-ZIP			
5.1 TITLE		Change	Addition
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE		Change	Addition
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY-ST-ZIP			

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 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 oath, 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 on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/14/97

Date

954 4634 315

Daytime Phone #

CR2E034 (9/96)