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

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

ANNUAL REPORT Secretary of State 1997 DIVISION OF CORPORATIONS			NS	Secretary of State					
	MENT # V19118	(1)							
Principal Place	e of Business	Mailing Address				- 1 1801) DIKERI SIRIR KRIVI 1800) MEGA I	in eien eie n		
1242 WASHING		1242 WASHINGTON AVE							
MIAMI BEACH I	FL 33139	MIAMI BCH FL 33139-4614 US							
						 Date Incorporated or Qualified 03/06/1992 		Date of Last Re /01/1996	aport .
r	lace of Business	2a. Mailing Address			4, FEI Number 65-0316084		Ap	plied For	
Suite, Apt.	Suite, Apt. #, etc.	, Apt. #, etc.					\$8.75 A	t Applicable	
27					**************************************	6. Certificate of Status Desired		Fee Re	
City & State	City & State City & State					6. Election Campaign Financing Trust Fund Contribution	т.	\$5.00 Added to	
Zip	ın Country Zip Co			ntry	· · · · · · · · · · · · · · · · · · ·	8. This corporation has liability for	or intangible		
24	25	[29] [3	0		·····	Florida Statutes		□ No	
PATI	9. Name and Address of Current ERMOSTRO, ANNEMARIE	Registered Agent		81	Name	10. Name and Address of New I	registered	Agent	
	75 COLLINS AVE		1	82	Street Addre	ss (P.O. Box Number is Not Accept	able		
STE 310-S					Sidel Addre	as (F.O. Box Number is 140t Accept	anie!		
BAL	HARBOUR FL 33154			83		•			
			1	84	City		FL	85 Zip (Code
11. Pursuant	to the provisions of Sections 607.0502 egistered agent, or both, in the State o m familiar with, and accept the obligati	and 607.1508, Florida Statutes	the abo	OVE-I	named corpo	pration submits this statement for the			s registered
опісе ог г agent. La	egistered agent, or both, in the State o m familiar with, and accept the obligati	ions of, Section 607.0505, Flori	da Statu	ites.	me corporauc	on a board or directors, rinereby acc	өрг шө ар	pointment as	registered
SIGNATURE	Signature, typed or printed name of registered agent	and title it applicable. (NOTE: (Pagistered	Agent	sionature require	d when reinstating)	DATE	· · · · · · · · · · · · · · · · · · ·	
12.	OFFICERS AND	DIRECTORS	13.			ADDITIONS/CHANGES TO OF	ICERS AN		
TITLE	PSTD PATERNOSTRO, ANN HARIE	☐ DELETE	1.1 Total 1.2 NAM					Change	Addition
NAME STREET ADDRESS	1242 WASHINGTON AVENUE		1		DORESS	:			II.
CITY-ST-ZIP	MIAMI BEACH FL		1.4 01(1)		. 1				
TITLE				21 TITLE				Change	Addition
NAME CAMES CARROLOGIC	CHIAVARO, ANTONIO 1242 WASHINGTON AVENUE			2.2 NAME 2.3 STREET ADDRESS			•		
STREET ADDRESS CITY-ST-ZIP	MIAMI BEACH FL		2.4 CiT		' H				ı
TITLE	VPS	Dr. 475		3.1 TITLE				Change	Addition
NAME	PATERNOSTRO, ANNE MARIE		3.2 NAN			1			
STREET ADDRESS	1242 Washington Avenue Miami Beach FL 33139		3.3 STREET 3.4. CITY-1						
CITY - ST-ZIP TITLE			4.1 TITL		- ZIP			Change	Addition
NAMÉ			4. 2 NAI	ME		·			
STREET ADDRESS			4.3 STR	REET A	DORESS				
CITY-ST-ZIP		DELETE	4.4 CITS 5.1 TITL		-ZIP		<u> </u>	Change	Addition
TITLE NAME		bittle	5.2 NAM					Last County	L ROMON
STREET ADDRESS					ADDRESS				
City-St-ZiP		Dr. rer	5.4 CITY		- ZIP				F 1 4 4 697
TITLE		☐ DELETE	6.1 TITL					L Change	Addition (
NAME STREET ADDRESS			6.2 NAN 6.3 STR		DDRESS				
CITY ST-ZIP			6.4 CIT	Y-ST-	- ZIP				
	by certify that the information supplied in indicated on this annual report or su					ou alonatura abali baya aba asasa ta			dan makhi khasi
l am an o appears i	in indicated on this annual report or su fficer or director of the corporation of h Block 12 or Block 13 if changed, or o	ne receiver or trustee empower in an attachment with an addre	red to ex	XOCU	te this report	as required by Chapter 607, Florida	Statutes;	and that my n	ame

SIGNATURE:

FILED

Apr 29 1997 8:00am