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

PROFIT CORPORATION ANNUAL REPORT

CITY-ST-ZIP



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

May 09 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # P9500075945 (2)

Principal Place of Business 2100 INTERNATIONAL PLACE 200 SOUTH EAST SECOND STREET MIAMI FL 33131 MIAMI FL 33131 DREENTON N. VER PLOEG, P.A. Mailing Address 2100 INTERNATIONAL PLACE 200 SOUTH EAST SECOND STREET MIAMI FL 33131								
					 Date Incorporated or Qualified 10/03/1995 	,	ate of Last R 28/1996	leport
2. Principal Place of Business 28. Mailing Address					4. FEI Number	, ,		oplied For
26		·			65-0615033			ot Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. 27					5. Certificate of Status Desired		\$8.75 / Fee Re	
City & Stat	0	City & State			6. Election Campaign Financing	<u></u>	\$5.00	
23		28			Trust Fund Contribution		Added t	
Zip	Country	Zip	Countr	У	8. This corporation has liability fo			199.032,
24	25 9. Name and Address of Curre	29	30]		Florida Statutes 10. Name and Address of New R		No	
\ <i>f</i> ED	PLOEG, BRENTON N ESQ.	ur Hallardian Whalif	81	Name	IV. Harrie and Address of New h	-Aistate0	Chour	
2100 INTERNATIONAL PLACE 200 SOUTH EAST SECOND STREET MIAMI FL 33131			82	Stroat Add	t Address (F.O. Box Number is Not Acceptable)			
			83	9				
			84	City		FL	85 Zip (Code
11 Dureuent	to the provisions of Sections 607.06	02 and 607 1609 Florida Stat	uton the pho	L named ser	poration submits this statement for the alion's board of directors. I hereby acc			e rociatored
SIGNATURE	Signature, typed or printed name of registered at	pent and fille if applicable. (No ND DIRECTORS	OTE: Registered Ap	gen; signature røqu	ilred who reinstating) ADDITIONS/CHANGES TO OFF	DATE ICERS AND	O DIRECTOR	RS IN 12
TITLE	DPT DELETE		1.1 TITLE			<u> </u>	Change	Addition
NAME	VER PLOEG, BRENTON N		1.2 NAME	1				
STREET ADDRESS			1.3 STREE	1 ADDRESS				
CITY-ST-ZIP TITLE	MIAMI FL 33131-2154	☐ DELÉTE	1.4 CITY-	ST-ZIP			Change	Addition
NAME	WILLIAMS, ANTHEA E		2.1 TITLE 2.2 NAME				CT change	L_J Addition
STREET ADDRESS	100 SECOND ST, #2100			1 ADDRESS				
CITY-ST-ZIP	MIAMI FL 33131-2154		2. 4 CITY	1				
TITLE		DELETE		31 TILE		Change	Addition	
NAME			3.2 NAME					
STREET ADDRESS			l i	T ADDRESS				
CITY-ST-ZIP TITLE		□ DELETE	3.4. DITY-	- ST - ZIP			Change	Addition
NAME		C ortait	4.2 KAM	,			Unange Co	L.1 VO00000
STREET ADDRESS			•	T ADDRESS				
CITY-ST-ZIP			4.4 OHY-	i				
TITLE	DELETE		5.1 TITLE				Change	Addition
NAME			52 NAME	{				
STREET ADDRESS			5.3 STREE	I ADDRESS				
CITY-ST-ZIP		Driver	5.4 CHY-	\$1 - ZIP			T-10:	1.000
TITLE		☐ DELETE	6.1 TITLE				Change	☐ Addition
NAME CIRCL ADDRESS			6.2 NAME					
STREET ADDRESS			0.3 3 1821	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 indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same logal effect as if made under eath; that I am an officer or director of the corporation or the receiver 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 tropaged, or on an attachment with an address.

SIGNATURE: