FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

Corporation Name

Principal Place of Business

DOCUMENT # 163982

(2)

Mailing Address

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J. P. M	IMI JAIK	IJ IME	и м в го	IINL

MIAMI SPRI	NGS FL 33166	372 SOUTH DR MIAMI SPRINGS FL 33	166			
				3. Date Incorporated or Qualified 01/08/1951	3a. Date of Last Report 03/21/1995	
Principal Place of Business 2e		2a. Mailing Address		4. FEI Number	Applied For	
21 2		26		59-0980396 Not Applica		
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & Star 23	te	City & State		Election Campaign Financing Trust Fund Contribution	S5.00 May Be Added to Fees	
Zip	Country	Zıp	Country	8. This corporation has liability for it	ntangible tax under s. 199.032,	
24	25	29	30	Florida Statutes	•	
Name and Address of Current Registered Agent			81 Name	10. Name and Address of New Registered Agent		
372 SC	A,RICHARD DUTH DR SPRINGS FL 33166		83 84 City	ldress (P.O. Box Number is Not Acceptabl	6)	
or registe	to the provisions of Sections 607.050; red agent, or both, in the State of Flor ith, and accept the obligations of, Sec	ida. Such change was authorize	s, the above-named corp ed by the corporation's be	oration submits this statement for the purporard of directors. Thereby accept the appo	pose of changing its registered office intrient as registered agent. I am	
SIGNATURE	Signature, typed or printed name of registered agen	Land tile if application (NO	IF Registered Agent signature requ	med when in a stalligh	DATE	
12.	12. OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTORS IN 12	
THILE	VSD	☐ DELETE	1.11016		Change Addition	
NAME	STRAMA,THOMAS		1.2 NAME			
STREET ADDRESS	7 PINEWOOD CIRCLE		1.3 STREET ADDRESS			
CITY-ST-ZiP	HOUSTON TX	_,	1.4 CITY - ST. ZIP			
TITLE	PD	☐ DELETE	2 1 TITLE		Change Addition	
NAME	STRAMA RICHARD		2.2 NAME			

2.3 STREET ADDRESS

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-7IP

4.4 CITY - ST - ZIP

3 4 CHY-ST-71F

2.4 CHY- S1- ZIP

3 1 TITLE

3.2 NAME

4 1 THLE

4.2 NAME

5. 1 TIT: E

5.2 NAME

& 1 TILLE

6.2 NAME

CITY-ST-ZIP 14. To hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 or on applicachment with an address.

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY - ST - ZIP

CITY-ST-ZIP

CITY-\$T-7IP

NAME

TITLE

NAME

TITLE

NAME

TITLE

NAME

372 SOUTH DR

MIAMI SPRINGS FL

Richard Strama

DELETE

DELETE

DELETE

□ DELETE

(305) 526-7392

Change Addition

Addition

Addition

Addition

☐ Change

☐ Change

☐ Change