	LE NOW: FILING I PROFIT PROPARTION NUAL REPORT 1996	FLOF	RIDA DEPA Sandra Secreta	RTMENT OF B. Mortham ary of State CORPORAT	STATE				
	JMENT # 333	1091	(7)						
1. Corporati	ion Name:  RA INCORPORATED	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	(')						
ELVII	NA INCONFONATED					   1 <b>21136 11186</b> 111 <b>88</b> 1118	DEND FRIENDING REG	 	) 
Principal Plac	ce of Business	Mailing Addres	SS		<del></del> .				
6325 MAYA CORAL GA	'NADA Ables Fl 33146	6325 MAYN. Coral Gae		146					
• Principal (	EV of Commission		_			<ol> <li>Date Incorporated or Quality</li> <li>07/29/1968</li> </ol>	alified 3a. E	04/27/1	•
2. Principai r	Place of Business	2a. Mailing Add	dress			4. FEI Number			Applied For
Suite, Apt	l. #, etc.	Suite, Apt.	#, etc.			<b>59-1284385 5.</b> Certificate of Status Desir	red []	•	Not Applicable  75 Additional e Required
City & Sta	ite	City & State	е			6. Election Campaign Finan- Trust Fund Contribution	cing	\$5.	.00 May Be
7ip 4	Country 25	Zip <b>29</b>		Country 30	y	8. This corporation has liabi	ity for intangible		
	g. Name and Address of C	urrent Registered Agent	t		T.	10. Name and Address of		d Agent	
COHE	N, JAY M			81				-	
6325 N	MAYNADA			82		dress (P.O. Bax Number is Not Ac	ceptable)		
CORAI	L GABLES FL 33146			83	<u> </u>				
					ļ				
				84	City			85	Zip Code
II. Pursuant	to the provisions of Sections 607	'.0502 and 607.1508, Flori	da Statutes		L.,	oration submits this statement for t	F he purpose of o		·
familiar w	t to the provisions of Sections 607 ered agent, or both, in the State of with, and accept the obligations of,	7.0502 and 607.1508, Florid f Florida. Such change was , Section 607.0505, Florida	da Statutes s authorized s Statutes.		L.,	oration submits this statement for t aird of directors. I hereby accept th			·
11. Pursuant or registe familiar w	vith, and accept the obligations of,	, Section 607,0505, Florida	Statutes.	, the above- by the corp	named corpo poration's bo	аго от опостоть. Т негеру ассерт (п	he purpose of a e appointment		·
familiar w	vith, and accept the obligations of,  Signature, typed or printed name of registared	, Section 607,0505, Florida	Statutes.	the above- by the corp	named corpo poration's bo	red when reinstating)	he purpose of de appointment	changing its as registere	registered office ed agent. I am
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familiar w SIGNATURE 12.	Signature, typed or printed name of registate OFFICER: P COHEN, JAY M.	, Section 607,0505, Florida ed agent and tille Mapplicable IS AND DIRECTORS	Statutes.	Registered Age	named corpo poration's bo	red when reinstating)	he purpose of de appointment	changing its as registere	registered officed agent. I am
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familiar w SIGNATURE  12.  TILE HAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registate OFFICER: P COHEN, JAY M.	, Section 607,0505, Florida ed agent and tille Mapplicable IS AND DIRECTORS	Statutes.	Registered Ago  13. 1.1 THLE 1.2 NAME	named corporation's bo	red when reinstating)	he purpose of de appointment	changing its as registere	registered officed agent. I am
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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 effords Statutes. Trufner 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 under appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE:

SIGNATURE:

SIGNATURE Date Posts and Type OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR