

FILED



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

Jan 30 1997 8:00am  
Secretary of State

[illegible]

<b>3. Date Incorporated or Qualified</b> <b>08/19/1969</b>	<b>3a. Date of Last Report</b> <b>02/20/1996</b>
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2. Principal Place of Business		2a. Mailing Address		4. FEI Number <b>59-1285876</b>		Applied For	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/>		Not Applicable	
22 City & State		27 City & State		5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>	
23 Zip		28 Zip		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
24 Country		29 Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
25		30					

81	Name
82	Street Address (P.O. Box Number is Not Acceptable)
83	
84	City
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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_  
 Signature typed or printed name of registered agent and title if applicable

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	CEO	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	CHAPLIN, HARVEY R		1.2 NAME		
STREET ADDRESS	1600 N.W. 163RD ST.		1.3 STREET ADDRESS		
CITY - ST - ZIP	MIAMI FL 33169		1.4 CITY - ST - ZIP		
TITLE	POD	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	CHAPLIN, WAYNE E.		2.2 NAME		
STREET ADDRESS	1600 N.W. 163RD ST.		2.3 STREET ADDRESS		
CITY - ST - ZIP	MIAMI FL 33169		2.4 CITY - ST - ZIP		
TITLE	D	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	ISIDORE A. BECKER		3.2 NAME		
STREET ADDRESS	1600 N.W. 163RD ST.		3.3 STREET ADDRESS		
CITY - ST - ZIP	MIAMI FL 33169		3.4 CITY - ST - ZIP		
TITLE	VPD	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	ELLIOT DINNERSTEIN		4.2 NAME		
STREET ADDRESS	1600 N.W. 163RD ST.		4.3 STREET ADDRESS		
CITY - ST - ZIP	MIAMI FL 33169		4.4 CITY - ST - ZIP		
TITLE	VPCF	<input checked="" type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME	HERBERT S. JOSEPH		5.2 NAME	Senior Vice President Melvin A. Dick 1600 NW 163 Street Miami, FL 33169	
STREET ADDRESS	1600 N.W. 163RD ST.		5.3 STREET ADDRESS		
CITY - ST - ZIP	MIAMI FL 33169		5.4 CITY - ST - ZIP		
TITLE	VPT	<input type="checkbox"/> DELETE	6.1 TITLE		
NAME	BECKER, STEVEN R		6.2 NAME		
STREET ADDRESS	1600 N.W. 163RD ST.		6.3 STREET ADDRESS		
CITY - ST - ZIP	MIAMI FL 33169		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 included 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  
 STEVEN B. BOCCIA, FRANK VP/Treasurer

1-16-97

(305) 625-4171

Год	Число	Средний
1990	10	10
1991	10	10
1992	10	10
1993	10	10
1994	10	10
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2109	10	10
2110	10	10
2111	10	10
2112	10	

Daytime Phone #

CP2E034 (9/96)