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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

	MENT # 378286 PREALTY CORPORATION	(:	9)		· · · · · · · · · · · · · · · · · · ·				
Principal Place of Business 1710 SOUTH MIAMI AVENUE MIAMI FL 33129 US		Mailing Address 1710 SOUTH MIAMI AVENUE MIAMI FL 33129-1511 US			- I THE THE THIN SOUR LIKE HOUS LOVID BUT OVER COMM BUSIN BUSIN BUSIN BUSIN STER CONT. SEC.				
						3. Date Incorporated or Qualified 03/04/1971		e of Last R	eport
2. Principal i	Place of Business	2a. Mailing A	ddress	·····································		4. FEI Number		Ar	plied For
21		26				59-1707950			t Applicable
Suite, Apt 22	#, ets	Suite, Apt	t. #, etc.			5. Certificate of Status Desired	×	\$8.75 / Fee Re	
City & Sta	rte	h1	ate	<del></del>		Election Campaign Financing     Trust Fund Contribution	П	\$5.00 Added	
<b>23</b>	Country		Т	Coun	try	This corporation has liability for	intanoible t		
24	h '	<b>-</b>	<u>[</u>					No	195.002,
						10. Name and Address of New Ro	gistered A	gent	
FER	RNAÑDEZ, MARIA L.	TY CORPORATION  Mailing Address AVENUE  1710 SOUTH MIAMI AVENUE MIAMI FL 33129-1511 US  DELETE  AVENUE  1710 SOUTH MIAMI AVENUE MIAMI FL 33129-1511 US  26. Mailing Address 26. Surte, Apt. #, etc. 27. City & State 28. Country 25. 29. 30  Name and Address of Current Registered Agent  EZ, MARIA L  JITH MIAMI AVENUE 33129  Provisions of Edictions 6/7 / 502 and 607. 1508, Florida Statutes, red agent or bold). In the State of Florida, Such change was authorized in the company of the philipations of, Section 607.0505, Florida Statutes, red agent or bold). In the State of Florida, Such change was authorized in the company of the philipations of, Section 607.0505, Florida Statutes, red agent or bold). The philipations of, Section 607.0505, Florida Statutes, red agent or bold). The philipations of, Section 607.0505, Florida Statutes, red agent or bold). The philipations of, Section 607.0505, Florida Statutes, red agent or bold). The philipations of, Section 607.0505, Florida Statutes, red agent or bold). The philipations of, Section 607.0505, Florida Statutes, red agent or bold). The philipations of, Section 607.0505, Florida Statutes, red agent or bold). The philipations of, Section 607.0505, Florida Statutes, red agent or bold). The philipations of, Section 607.0505, Florida Statutes, red agent or bold). The philipations of, Section 607.0505, Florida Statutes, red agent or bold). The philipations of, Section 607.0505, Florida Statutes, red agent or bold). The philipation of the			Name				
171	O SOUTH MIAMI AVENUE			ŀi	32 Street Add	dress (P.O. Box Number is Not Accepta	ble)		
MIA	MI_FL 33129								·
					33				
	$\sim$ 4			1	City			85 Zip (	Code
	$\langle \ \rangle \langle \ $			- 1	11		<u> </u>	1 1	
office or agent 1.	requistered agent, or both, in the State art familiar red yand agent the policy	of Florida, Such of ations of, Section 6	hange was at 507.0505, Flor	uthorized ride Statu	by the corporates.	ation's board of directors. I hereby acce	pt the appo	intment as	registered
			(NOTE:		Agent signature requ	uired when reinstating)	DATE		
12.			DELETE	13.	<del>,</del>	ADDITIONS/CHANGES TO OFF		DIRECTOR Change	RS IN 12
LILE	PD / ANTHONY D	L	) Deceit	117171	}	•	t	cliange	TT Magition
NAME				12 NA					
STREET ADDRESS				•	EET ADDRESS				I
C TY - ST - ZIP THEE	D D D		DELETE	2 1 TITE	r-ST-ZiP			Change	Addition
NAME		hoon	] Decent	2.2 NAN	-		1	_1 0.0.180	710011011
STREET 400RESS	DELCOCAL DOAD			1	EET ADDRESS				'
CITY - ST - ZIP	GLENS FALLS NY				Y-ST-7/P				
Hit	VD		DELETE	3.1 TITL		· · · · · · · · · · · · · · · · · · ·		Change	Addition
NAME	FERNANDEZ, MARIA L			3.2 NAM	AE			_ ,	
STREET ADDRESS	4944 661 991 4 11 4 541 4 1 991 11				EET ADORESS				1
CITY - \$1 - ZVP	MIAMI FL			1	Y-ST-ZIP				
MUE	TD		DELETE	4.1 101	······································			Change	Addition
NAME	SERRA, JOE			4. 2 NA	ME				
STREET ACORESS	REARDON ROAD			4.3 STR	EET AODRESS				
CHY+ST-ZiP	GLENS FALLS NY			4.4 CIT	Y-ST-ZIP				
THEF			DELETE	5.1 7(7)	E		7	Change	Addition
NAME				5.2 NA)	AE .				
STREET ADDRESS				5.3 STR	EET AODRESS				
Crivi-S1-Ziri			····	5.4 CIT	Y-ST-ZIP				
TOTAL			DELETE	6.1 Titl	.E			Change	☐ Addition
NAME				6.2 NAN	AE [				

14. I do hereby certify that the information supplied with this filling 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 legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chepter 607, Florida Statutes; and that my name appears in Block 12 on Block 13 if changed, or on an attachment with an address.

6.3 STREET ADORESS 6.4 CITY-SY-ZIP

SIGNATURE:

STREET ADDRESS

City - \$1 - 20P

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1 9 7 305 558-4446

**FILED** 

May 19 1997 8:00am

Secretary of State