## 165° BEFORE 5-1-97

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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

ANNUAL REPORT 1997				Secretary of State DIVISION OF CORPORATIONS					Secretary of State					
		# 38228° INSTRUCTION, IN		(4)					1 ( <b>41) (12</b> (12 <b>)</b> (14)	AF MANA MAAN KANAN KUU	41111 100H H	HARAF WIRLI RIRIA	<b>418</b> 11 1 <b>18</b> 1	
Principal Place of Business 8804 S W 129 ST			88	Mailing Address  8804 S W 129 ST										
MIAMI FL 3317	76		Mi	IAMI FL 33176-5919				3.	Date Incorpora 05/17/1971	ated or Qualified		te of Last Re 31/1996	eport	
2. Principal FI	lace of Busir	1085	2a.	. Mailing Address				4	. FEI Number 59-135246	59	1 77	Ap	pplied For of Applicable	
Suite, Apt #, etc				Suite, Apt. #, etc.				6	. Certificate of S			\$8.75 A Fee Re		
City & State				City & State				6	Election Camp Trust Fund Co	**		\$5.00 Added t		
Zip 24	Country 25			Zip   Co.   30			8. This corporation has liability for intangible tax under s. 19 Florida Statutes  No  10. Name and Address of New Registered Agent					199.032,		
p, Name and Address of Current Registered Agent AARON (LEE) 20310 FAIRWAY OAKS DR. #131 BOCA RATON FL 33434						81 82 83 84				er is Not Acceptab		85 Zip (	Code	
SIGNATURE		ions of Sections 607.05 gent, or both, in the Stati in, and accept the oblig or printed name of registered at					e-named co the corpora i.			statement for the pars, I hereby accep		changing its	s registered registered	
12.	Significa, iyood	OFFICERS At			13.		ill a Briannie 164			ANGES TO OFFIC		DIRECTOR	S IN 12	
TITLE NAME STREET ADDRESS	P AARON, 8804 S.V MIAMI FE	v. 129th Street		[] DELETE	1.21 1.33		ADDRESS					Change	Addition	
TITLE NAME STREET ADDRESS	S HARDIN, 8804 S.V	THOMAS V. 129TH STREET		☐ DELETE	2.11 221	NAME	ADDRESS	<del> </del>				Change	Addition	
CITY - ST - ZIP TITLE NAME STRECT AODRESS	MIAMI FI	•		DELETE	3.1 1 3.2 f	NAME	ADDRESS	·····			Presidents - 1, - 2, - 1	Change	Addition	
TITLE NAME STREET ADDRESS			V/W   \$44.5 \	DELETE	4.11	CITY-S TITLE NAME STREET	ADDRESS	· · · · · · · · · · · · · · · · · · ·				Change	Addition	
CITY: ST-ZIP TITLE NAME STREET ADDRESS			W*************************************	☐ DELETE	5.1 1 5.2 I	NAME	ADORESS					Change Change	☐ Addition	
CHY-SI-ZIP TIFLE NAME STREET ADDRESS				☐ DELETE	6.11	CITY-S FITLE NAME STREET	T-ZIP ADDRESS	<del></del>		· · · · · · · · · · · · · · · · · · ·		Change	Addition	
C(TY-ST-ZIP	<u> </u>				641	OITY-S	T-ZIP	<u></u>						

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 legal effect as if made under oath; that I am an officer or director of the corporation or the receive or fusilee 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: (

**FILED** 

Feb 11 1997 8:00am