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

	AVENUE	Mailing Address 6917 COLLINS AVENUE MIAMI BEACH FL 33141-3	263		
					Date of Last Report 08/08/1996
2, Principal P	lace of Business	2a. Mailing Address 26		4. FEI Number 13-3184413	Applied For Not Applicable
Suite, Apt.	#, elc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
*City & Stat	n	City & State		6. Election Campaign Financing	Fee Required \$5.00 May Be
23	Country	Zip	Country	Trust Fund Contribution	Added to Fees
Ζφ 24	25	29	30	8. This corporation has liability for Intang	gible tax under s. 199.032,
	9. Name and Address of Currer			10. Name and Address of New Register	red Agent
NES	STOR, BRENDA		61 Name		
6917 COLLINS AVENUE			82 Street A	Address (P.O. Box Number is Not Acceptable)	
SUITE 1611			July Street A	rouress (1.0. box realines is real Acceptable)	
MIA	MI BEACH FL 33141		83		
			84 City		85 Zip Code
			04 04,		
office or r	registered agent, or both, in the State im familiar with, and accept the oblig	of Florida. Such change was ations of, Section 607.0505, Fi	authorized by the corp orida Statutes.	corporation submits this statement for the purpor oration's board of directors. I hereby accept the	appointment as registered
44	Signature typed or printed name of registered ag		E: Registered Agent signature		· -
12. Till!	AT OFFICERS AN	D DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition
NAME	STRASSBERG, BLANCHE	LJ DELECE	1.1 TITLE	Launer, Blanche 5	THE CHARITY TO VIDICION
STREET ADURESS	6917 COLLINS AVENUE		1.3 STREET ADDRESS	Ludher, Dianaic 3	•
	MIAMI BEACH FL 33141				
CHY-ST Z#	VD	☐ DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		Change Addition
NAME	MOTTRAM, LISA		22 NAME	Field, Lisa M.	44
STREET AUDRESS	6917 COLLINS AVENUE		2.3 STREET ADDRESS	i leid) Eloni i i	
CITY - ST - 7IP	MIAMI BEACH FL 33141		2. 4 CITY-ST-ZIP		
Tillé	PD	☐ DELETE	3.1 TITLE		Change Addition
NAME	POSNER, VICTOR		3.2 NAME		
STREET ADDRESS	6917 COLLINS AVENUE		3.3 STREET ADDRESS		
CHTY-ST ZIP	MIAMI BEACH FL 33141		3.4. CITY-ST-ZIP		
THE	EDST	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	NESTOR, BRENDA		4. 2 NAME		
STREET ADDRESS	6917 COLLINS AVENUE		4.3 STREET ADDRESS		
CHY-S1-ZP	MIAMI BEACH FL 33141	T proper	4.4 CITY - ST - ZIP		
THE		☐ DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	- " " " " " " " " " " " " " " " " " " "	☐ DELETE	5.4 CITY - ST - ZIP 6.1 TITLE		Change Addition
		[_] 0222.16	6.2 NAME		End provide First Venterial
NAME STREET ADDRESS			6.3 STREET ADDRESS		
STREET RUDINGSS			0.0 OTHER NUMBERS		

SIGNATURE:

14. If 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 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 application of the corporation of the c

FILED

May 16 1997 8:00am

Secretary of State