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

DOCUMENT # 519133

(3)

1. Corporation	SON INVESTMENT, INC. ont Business DRIVE	Mailing Address 6262 SUNSET DRIVE PH #236 MIAMI FL 33143-4843							
US		U\$				3. Date Incorporated or Qualified 11/24/1976	/1976 03/19/1996		
	ace of Business	2a. Mailing Address				4. FEI Number 59-1814075		 	plied For
Suite, Apt. +	#, etc.	Suite. Apt #, etc.						\$8.75	t Applicable Additional
22		27				5. Certificate of Status Desired		Fee Re	
City & State)	City & State				6. Election Campaign Financing		\$5.00	
Zip	Country	[28] Zip	Cour	ntrv		Trust Fund Contribution 8. This corporation has liability for	r intensib	Added t	
24	25	29	30	,			r intangiti Yes		. 199.032,
	9. Name and Address of Curren					10. Name and Address of New F	egistere	d Agent	
ROS	ENBERG, CHARLES H.			81	Name				
6262 SUNSET DR.				82	Street Add	dress (P.O. Box Number is Not Acceptable)			
	PENTHOUSE 236								
MIAN	AI FL 33143			83					
			1	84	City		F	85 Zip (Code
office or re agent. Lar SIGNATURE	to the provisions of Sections 607 0500 ogistered agent, or both, in the State in familiar with, and accept the obliga Signifies bjed or justical agence stagisted agen	of Florida, Such change was ations of, Section 607,0505, Fl	authorizec orida Statu	l by Jies.	the corpora	rporation submits this statement for the ation's board of directors. I hereby acc uired when reinstaling)	purpose ept the ap	pointment as	registered
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFF	ICERS A		
TITLE	PD Rosenberg, Charles	[_] DELETE	1	1,1 TITLE				Change	Addition
NAME	6262 SUNSET DRIVE, #PH		1.2 NA		ADORESC				
STREET ADDRESS CITY+ST-ZIP	MIAMI FL			1.3 STREET ADDRESS 1.4 CITY - ST - ZIP					
TITLE		☐ DELETE	2 1 TIT					Change	Addition
NAME			22 NA	ME					
STREET ADDRESS			2.3 STR		ADDRESS				
CITY - ST - ZIP				2. 4 CITY - ST - ZIP					<u> </u>
TITLE		L DELETE	3.1 T/TLF					☐ Change	Addition
NAMÉ OTOSST LOLOGGE			3.2 NA		1000000				
STREET ADDRESS			1		ADDRESS				
CITY - ST - ZIP TITLE		OELETE			T-ZIP			Change	Addition
NAME		news	417IT 42N/						
STREET ADDRESS			i i		ADDRESS				
CITY - ST - ZIP			4.4 CH						
TITLE	DELETE		5 1 TIT	5 1 TITLE				Change	Addition
NAME			5 2 NA	ME	1				
STREET ADDRESS			5351	REET	ADDRESS				
CITY-SI-ZIP		DELETE	5.4 CF		T-ZIP			1 0	
TiTLE				1 TOTLE				L. Change	Addition
NAME OFFICE TRANSCO			6.2 NA		1000000				
STREET ADORESS			1		ADDRESS				
City-Si-7iP 14. I do heret	by certify that the information supplied	d with this filing does not qual	6,4 Cli ify for the			ed in Section 119.07(3)(i), Florida Statu	tes. I furth	ner certify that	the
informatio	on indicated on this annual report or s	supplemental annual report is:	true and a	ccu	irate and th	at my signature shall have the same le ort as required by Chapter 607, Fiorida	pal effect	as if made un-	der oath: tha

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

305-274-006

FILED

Jan 14 1997 8:00am

Secretary of State

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