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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 522750

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FILED Apr 28 1997 8:00am Secretary of State

Principal Piace of Business 2988 GRIFFIN RD. FT. LAUDERDALE FL 33312 Mailing Address 2988 GRIFFIN RD. FT. LAUDERDALE FL 33312 FT. LAUDERDALE FL 33312-5653										
						3. Date Incorporate 01/01/1977	d or Qualified	3a. Date 04/1	of Last F 6/1996	leport
2. Principal F	Place of Business	2a. Mailing Addres	SS			4. FEI Number 59-1713293		······································	h+-	oplied For ot Applicable
Suite, Apt	#, etc	Suite, Apt. #, e	tc.			5. Certificate of Stat	tus Desired			Additional equired
	City & State City & State					6. Election Campaig Trust Fund Contri				May Be to Fees
7ip 24	Country 25	Z ₁ p	30	untry	,	8. This corporation Florida Statutes		Yes 🗀	No	. 199.032,
	9. Name and Address of Curr	ent Registered Agent			1	10. Name and Addr	ess of New R	egistered A	gent	
	ORSTEIN, RAYMOND W.			81	Name					
2988 GRIFFIN RD. FT. LAUDERDALE FL 33312				82	Street Add	fress (P.O. Box Number is Not Acceptable)				
				83						
				84	City			FL	85 Zip	Code
SIGNATURE		agent and title if applicable	(NOTE: Registere		per erulangia fine	ulred when reinstating) ADDITIONS/CHAN	IGES TO OFF	DATE	DIRECTO	RS IN 12
TITLE	PD DAYMOND W	DELE	TE 1.1 T	ITLE				I	Change	Addition
NAME	BOORSTEIN, RAYMOND W 2988 GRIFFIN RD.			AME	ţ		ì			
STREET ADDRESS	FT. FAUDERDALE FL				T ADDRESS		,			
CHTY-ST ZIP	D	- CDELLE			ST-ZIP				Change	Additibn
NAME	BOORSTEIN, KAY		2.21	NAME	[
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City-St-ZiP	FT. LAUDERDALE FL	☐ DELI			ST-ZiP				Change	☐ Addition
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STREET ADDRESS					T ADDRESS					
CHY-ST-ZIP			1.	City-	ST-ZIP					
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CITY - ST - 7IP TIPLE			ETE 4.17 4.21 4.35 4.40 ETE 5.17	TITLE NAME STREET CITY-S TITLE NAME	T ADDRESS ST-ZIP					
CITY - ST - ZIP TRILE NAME		☐ D£Lí	ETE 4.17 4.21 4.35 4.46 ETE 5.17 5.21 5.38	ITLE NAME STREET CHY-S TITLE NAME STREET	T ADDRESS ST-ZIP				Change	Addition
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Loc hereby corally man me miormation supplied with this tiling 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 an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR