FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

524386

DOCUN 1. Gerberation	MENT # 52438	36 (0)						
	AL BUSINESS INFORMAT	ION, INC.				ia bili bibli		
Principal Place of Business		Mailing Address	Mailing Address		-			
8300 NW 53RD STREET #204 MIAMI FL 33166-1612		8300 NW 53RD STREET #204 MIAMI FL 33166-1612						
					3. Date Incorporated or Qualified 01/25/1977	3a . D	06/13/19	•
2. Principal Plac	ce of Business	2a. Mailing Address		4. FEI Number Applied F		Applied For		
21] Suite, Apt. #	Letc.	Suite, Apt. #, etc.		59-2230371		Not Applicable \$8.75 Additional		
22		27		5. Certificate of Status Desired			Additional Required	
City & State		City & State			Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees	
Zφ Country 25		Ζφ 29	Country 30		8. This corporation has liability for intangible tax under s 199.032, Florida Statutes			
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New F	Register	ed Agent	
DEDOED	DONINA		81	Name				
BERGER, DONNA 200 SOMERSET WAY			82	Street Add	lress (P.O. Box Number is Not Acceptat	ole)		
	DERDALE FL 33326		83	3		·····	-	
			84	City			. 85 Z	Zip Code
11 Poissiant to	the moviezing of Spotions 607 050	2 and 607 1508 Florida Statut	tae tha shows	Domod como	rotion or hould this platers at facility	F	'L	·
or registere familiar with	ed agent, or both, in the State of Flor h, and accept the obligations of, Sec	ida. Such change was authori. tion 607.0505, Florida Statute	zed by the const.	poration's boa	ration submits this statement for the purific of directors. I hereby accept the app	xointment	as registere	id agent. I am
SIGNATURE .	Signative: 1500-d or printes France of registoric diagra-	tandtis dansi va	OIL Business As	et e unt e re i in	ed when reinstahryj	DA18		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
12.		ND DIRECTORS	13.	on symbole region	ADDITIONS/CHANGES TO OFF	* * * * * * * * * * * * * * * * * * * *		ORS IN 12
7011.7	PD						☐ Change	Addition
NAM:	BERGER, ALAN 8300 NW 53RD ST #204		1.2 NAME					
STREET ADDRESS CHY-ST-ZP	MIAMI FL		13 STREE	T ADDRESS				
THE	SD	☐ DELFTE	2 1 TITLE				Change	Addition
NAM:	BERGER, DONNA		22 NAME					
STREET ADDRESS	8300 NW 53RD ST #204		2 3 STREE	1 ADDRESS				İ
CHY S ₁ ZP TITLE	MIAMI FL	☐ DELETE	2.4 CiTY-				E) Change	Addition
NAM!			3.2 NAME				□ Change	Addition
STREET ADDRESS			33 STRE	ET ADDRESS				
CHY ST ZZ			3.4 CHY-	ST-ZIP				i
Ti LE		DELETE	4 1 TITLE				Change	Addition
NAME \$16EF1 ATIORESS			4.2 NAME					
CITY ST-ZIP			4.4 City	T ADDRESS				
TITLE		DELETE	5 1 TITLE				☐ Change	Addition
DAME			5.2 NAME					
STREET AMORESS			53 STREE	T ADDRESS				
CIP ST 7P		F) birri	5 4 CITY-					
TOTALE NAME		☐ DELFTE	B 1 TITLE				☐ Change	Addition
STREET ACORESS			6.2 NAME 6.3 STREE	T ADDRESS				
CIN SLZP			6.4 CITY-	-				
14. Edu bereby	certify that the information supplied	with this filing is voluntarily for	nished and do	es not qualify:	for the exemption stated in Section 119	1.07(3)(k),	Florida State	utes. I further

cathy that the mornation indicated of this armitted report of 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 of 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: James & Ferge

DONNA G. BERGER 1/18/96
Date