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

PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 539912

(6)

BUCHBINDER & ELEGANT, P.A.

FILED
Feb 04 1997 8:00am
Secretary of State

100 PNL. 1.28.97 305.358.1515

Principal Place of Business Mailing Address						T THE STATE AND IN THE TRIVE INDIE LIDIE AND HER HELD CONTRACT BEING HER THE FIRST F		
46 S W FIRST S MIAMI FL 33130		DR 48 S W FIRST Miami Fl 3313		4TH FLOX	R			
						3. Date Incorporated or Qualified		3
<del></del>	ace of Business	2s. Mailing Ac	ldress			4. FEI Number		Applied For
21   Costo April #	4	26 Cuito Apl	# oto			59-1751002		Not Applicable
Suite, Apt. #		Suite, Apt. <b>27</b>				5. Certificate of Status Desired	Fee	5 Additional Required
City & State	•	City & Stat	e			6. Election Campaign Financing		0 May Be
<b>23</b> Zip	Country	<b>28</b>   		Country		Trust Fund Contribution		ed to Fees
24	25	29		30		8. This corporation has liability for i	ntangible tax unde I Yes ☐ No	r s. 199.032,
	······································	of Current Registered Agen	t	1001		10. Name and Address of New Re		
FIFG	ANT, IRA M ESQ			81 N	ame		<u> </u>	
	W FIRST STREET	4TH FLOOR		82 St	reet Addr	ress (P.O. Box Number is Not Acceptab	le)	
	II FL 33130	(,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		02 31	reet Auur	ess (F.O. Box Number is Not Acceptab	ю	
				83				
		•		<b>84</b> C	ty		FL 85 Z	ip Code
11 Pursuant to	a the previous of Sections	: 607 0502 and 607 1508 Fi	orida Statu	ites the above-na	med corr	poration submits this statement for the p		a its registered
office or re	eg stered agent, or both, in	the State of Florida, Such ch	ange was	authorized by the	corporat	tion's board of directors. I hereby accep	t the appointment	as registered
	n farmilar with, and accept	the obligations of, Section 6	J7.U5U5, F	iorida Statutes.		•		
SIGNATURE	Signature: typed or profed name of re	gesternes agent and title if ar plicable	(40	TE: Registered Agent sig	nature requi	red when reinstating)	DATE	
12.		ERS AND DIRECTORS		13.	•	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECT	ORS IN 12
HILE	VS		DELETE	1.1 TOLE			Chan	je 🔲 Addition
NAME	ELEGANT, IRA M			1.2 NAME				
STREET ADDRESS	46 S W FIRST ST 4TH	FLR		13 STREET ADD	RESS			
CITY- ST - ZIP	MIAMI, FL 00000			1.4 CHY-ST-ZH	,			
HATE	PT		DELETE	21 TITLE			Chan	ge 🔲 Addition
NAME	BUCHBINDER, HARRIS			22 NAME	1	And the second second		
STREET ADDRESS	46 S W FIRST ST 4TH	FLR		23 STREET ADD	RESS			*
CITY-SI-7F	MIAMI, FL 00000			2. 4 CITY - ST - ZI	P			
TIPLE			DELETE	3 1 TITLE			Chan	ge Addition
NAME				32 NAME				•
STREET ADORESS				3.3 STREET ADD	RESS	•		
CIEA - 21 - 315	,		051545	34 CITY-ST-ZI	P	,	-	
THE		LJ	DELETE	4.1 TITLE		· ·	Chan	ge Addition
NAME				4. 2 NAME				
STREET ADDRESS				4.3 STREET ADD		· ·		
CITY-ST-ZIP			DELETE	4.4 C(TY - ST - Z()	<del>`                                    </del>		Chan	ge Addition
1111£			DECETE	5.1 TITLE			L. Ollan	ie 🗀 vanion
NAME STREET ADDRESS				5.2 NAME 5.3 STREET ADD	DEGC			
City-SI-Zip								
TOLE			DELETE	5.4 CITY-ST-ZH 6.1 TITLE			☐ Chan	ge
NAME				6.2 NAME			Laur Vitali	g- tand / 100/110/1
STREET ADDRESS	•			6.3 STREET ADD	BESS			
CITY - ST - ZIP				6.4 CITY - ST - ZI				
14. Ldo hereb	by certify that the information	n supplied with this filing do	es not qua	lify for the exemp	ion state	d in Section 119.07(3)(i), Florida Statute	s. I further certify t	hat the
Information Lam an of appears in	n indicated on this annual) flicer or director of the cou n Block 12 or Block 13 if d	eport or supplemental annual oration or the receiver or true langed or on an attachment	al report is stee empo with an ac	true and accurate wered to execute dress.	and that this repo	t my signature shall have the same lega rt as required by Chapter 607, Florida S	I effect as if made tatutes; and that n	under oath; that ny name