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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

•	1996		DE CORPORATIONS		
DOCUN 1. Corporation	MENT # 56482	23 (3)			
· •	EAST, INC.				
Principa' Place	of Business	Mailing Address			
18721 N.W. 11TH PLACE 18721 N.W. 11TH PLA MIAMI FL 33169 MIAMI FL 33169			ACE		
				3. Date Incorporated or Qualified 12/23/1977	3a. Date of Last Report 05/01/1995
2. Principal Pla	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt.	# oto	26		59-1816743	Not Applicable
22	r, 6to.	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	>	City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be
Zip	Country	<b>[28]</b>	Country	This corporation has liability for	Added to Fees intangible tax under s. 199.032.
24	25	29	30	Florida Statutes	s <b>Z</b> YNo
	9. Name and Address of Curr	rent Registered Agent	81 Name	10. Name and Address of New	Registered Agent
GARRET	T, DAVID L.			ress (P.O. Box Number is Not Accepta	bla)
	.W. 11TH PLACE			ress (r.o. Box Number is Not Accepta	Diej
MIAMI F	L 33169		83		
			84 City		85 Zip Code
11. Pursuant t	o the provisions of Sections 607.06	502 and 607.1508, Florida Stati	utes, the above-named corpo	ration submits this statement for the pu	urpose of changing its registered office
or register familiar wit	ed agent, or both, in the State of Fi th, and accept the obligations of, Se	orida. Such change was author ection 607,0505, Florida Statuti	rized by the corporation's boales.	ration submits this statement for the pu ard of directors. I hereby accept the ap;	pointment as registered agent. I am
SIGNATURE _					
12.	Signature, typed or printed name of registered as OF EICERS 7	professional transferable (** AND DIRECTORS	NOT: Begistered Agent signature require  1 13.	·	DATE FICERS AND DIRECTORS IN 12
THE	P	DELETE	1. 1 Tifle	ADDITIONS/OFFANGES TO OFF	Change Addition
NAME	GARRETT, DAVID		1.2 NAME		
STREET ADDRESS	18721 N.W. 11TH PL		1.3 \$TREET ADDRESS		
CITY-ST-7P TITLE	MIAMI FL VP	[] DELETE	1.4 CITY - ST - ZIP 2.1 TITLE	1-4	☐ Change ☐ Addition
NAME	GARRETT, MERCEDES	[] better	2.2 NAME		El cuando El vocition
STREET ADDRESS	18721 NW 11TH PL	·	2.3 STREET ADDRESS		
CITY-S1-7IP	MIAMI FL		2.4 CITY-\$1-2IF		
TITLE	S Garrett, Tanya	[[]] DELFTE	3 171116		Change Addition
NAME STREET ADDRESS	18721 NW 11TH PL		3.2 NAME 3.3 STREET ADDRESS		·
CITY-S1-ZIP	MIAMI FL		3.4 CHY-S1-70°		
TITLE	D	DELETE	4. 1 TITLE		Change Addition
NAME	GARRETT, DWAYNE		4.2 NAME		
STREET ADDRESS	18721 NW 11TH PL MIAMI FL		4.3 STREET ADDRESS		
CITY-ST-7IP TITLE	D	[] DELETE	4.4 CITY - ST - ZIP *5 1 TITLE		☐ Change ☐ Addition
NAME	GARRETT, ANGELA		5.2 NAME		
STREET ADDRESS	18721 NW 11TH PL		5.3 STREET ADDRESS		
CITY-SI-7P	MIAMI FL	prosp. ocean com	5 4 CITY - ST - ZIF	<del></del>	Page All Page Annual Page Annu
TITLE		DETE LE	6 1 TITLE		Change Addition
STREET ADDRESS			6.2 NAME 6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 C/TY-S1-Z/P		
14. I do hereb	y certify that the information supplic	ed with this filing is voluntarily fu	imished and does not qualify t	for the exemption stated in Section 119	).07(3)(k), Florida Statutes. I further
oath; that	I am an officer or director of the cor	rporteon or the receiver or trus	tec empowered to execute th	ate and that my signature shall have the iis report as required by Chapter 607, F	s same legal effect as it made under forida Statutes, and that my name
appears in	Block 12 or Block 13 if changed, o	A A	ACIT GSS.	11 - 4 -	
<b>SIGNAT</b>		Harrik		4-30-96	· !
	SIGNATURE AND TYPE	OR PRINTED NAME OF BIGNING OFFI	ICER OR DIRECTOR	Date	Daytme Phone ⊭