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

PROFIT CORPORATION ANNUAL REPORT

1996



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

DOCUMENT # 570081

(0)

MODEL INNIESTMENTS INC

Principal Place		Mailing Address	·· ·					
SUITE NO S		3440 SOUTH OCEAN SUITE NO \$-506	BLVD					
PALM BEACH	H FL 33480	PALM BEACH FL 334	180		3. Date incorporated or Qualified 04/21/1978	3a. Date of Last 05/01/1		1
2. Principal Place of Business		2a. Malling Address	2a. Malang Address		4. FEI Number	Applied For		-
21 26					59-1811214		Not Applicable	1
Suite, Apt. #, etc 22		Suite, Apt. #, etc. 27			5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		City & State			6. Election Campaign Financing	\$5.	.00 May Be	1
70		28			Trust Fund Contribution	Ad-	ded to Fees	_
Zip Country 25		29 Ziji	30		8. This corporation has liability for intang-ble tax under s 199.032, Florida Statutes 🛣 Yes 🔲 No			
	9. Name and Address of Currer	it Registered Agent	81	I Negara	10. Name and Address of New Ro	egistered Agent]
OTEON	NODAAN M		81	Name				
	Norman M. Juth Ocean Blvd, S-506		82	Street Add	ress (P.O. Box Number is Not Acceptabl	e)		1
	EACH FL 33480		83	 				-
17000	ENOTITE GOVERN							
			84	City		FL 85	Zip Code	
11. Pursuant t or register familiar wit	o the provisions of Sections 607,0502 ed agent, or both, in the State of Ho- n, and accept the obligations of Sect	and 607.1508, Florida State da Such change was author	ites the above ized by the corp	named corpo poration's boa	ration submits this statement for the purp rid of directors. Thereby accept the appo	uose of changing it intment as register	s registered office ed agent. I am	j
SIGNATURE	and decopy the obligations of Sect	ion dor .0000, i londa Statut	15.					
	Signature, typed or product running the patental April	ar tildi, d'apparatik	on the grader HAGE	 Esopolise in Land	erf when incressiving p	CIAIL		٦
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFFI	CERS AND DIREC	TORS IN 12	CR2E034 (12/95)
TITLE	PTD	☐ DELETE	1 1 1011.6			☐ Chang	e 🔲 Addition	12
NAME			1.2 NAME					8
STREET ADDRESS	3440 S OCEAN BLVD	LL EL 00000		ADDRESS	•			 교
CITY - ST - ZIP TITLE	PALM BCH, FL 00000	C DELETE	14 CIIY-9	31 ZP				贤
NAME	D WALMOLEV JANIE C	☐ DELETE	2 1 TIFLE			☐ Chang	e 🔲 Addition	
STREET ADDRESS	WALMSLEY, JANE S 26 BELSIZE RD		2.2 NAME					
City-St-ZiP			23 \$1966					
TITLE	VSD DELETE		2.4 Cd y - S 3.1 Td LE	1 · ZII.		Chaca	Addition	4
NAME	ATTOM I CARL		3 2 NAME			☐ Chang	e 🔲 Addition	
STREET ADDRESS	3440 S OCEAN BLVD		3 3 STREE	LADDHESS				
CITY-ST-ZIP	PALM BCH, FL 00000		3.4 City 9					
TITLE	DELETE		4 1 TiFLE			Change	e Addition	1
			4.2 NAME			C		
STREET ADDRESS			4.3 STHEET	ADDRESS				
CITY - ST - ZIP			4.4 CHTY - S					
TITLE		☐ DELETE	5 1 II LE			☐ Change	e 🔲 Addition	1
NAME			5.2 NAME				l	
STREET ADDRESS			5.3 STREET	ADDR: SS			1	
CITY-ST-ZIP			5.4 C-TY - S	1 - ZIP				
TATLE			6 1 Tif()			☐ Change	Addition	1
NAME			6.2 NAME					
STREET ADDRESS			6.3.5 FREE1	ADDRESS				
CITY-ST-ZIP	contifu that the information as a sixt	Charles and the second	64 OBY S	F - 21F				

I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 trusted 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: Norman M. Litera Norman M. Stern, Pres. April 9, 1996

407-586-8300 Dayline Proces