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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Feb 27 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 578968

(0)

Corporation INNISFR Principal Place	n Name EE, INC. e of Businoss	Mailing Address		·					
6955 N.W. 36TH AVENUE MIAMI FL 33147 6955 N.W. 36TH AVENUE MIAMI FL 33147-6505									
						3. Date incorporated or Qualified 07/25/1978	3a. Date of Last 06/11/1996	Report	
2. Principal Place of Business		2a. Mailing Address			-	4. FEI Number 59-1840140		Applied For	
Suite, Apt	# etc	Suite, Apt. #, etc.					60 75	Not Applicable Additional	
22		27				5. Certificate of Status Desired		Required	
City & State	e	City & State				6. Election Campaign Financing	\$5.00	May Be	
23	Company	28	T Cour	to.		Trust Fund Contribution		to Fees	
Z(p)	Country 25	Z (p	30 Cour	ilry		8. This corporation has liability for Florida Statutes	intangible tax under ☑ Yes ☐ No	s. 199.032,	
<u> </u>	9. Name and Address of Curren		1301			0. Name and Address of New Re			
RUB	EL, JANICE B.			81 Name		· · · · · · · · · · · · · · · · · · ·			
6955 N.W. 36TH AVENUE MIAMI FL 33147			ļ	32 Street	Address	ress (P.O. Box Number is Not Acceptable)			
			<u>ן</u>	B3					
			-	B4 City			FL 85 Zip	Code	
11. Pursuant t	to the provisions of Sections 607 050	2 and 607,1508. Florida Statu	ites, the ab	ove-named	corpora	tion submits this statement for the c	purpose of changing	its registered	
office or n	ogistered agent, or both, in the State in familiar with, and accept the obliga	of Florida, Such change was	authorized	by the corp	poration'	s board of directors. I hereby accept	ot the appointment a	s registered	
-	m rammar with, and accept the conga	mons or, section 607.0303, I	ionda Stato	105.		•			
SIGNATURE	Signiture, typed or per ted name of registered age	nl and tite if applicable (NC	TE: Registered	Agent signature	e required w	hen reinstating)	DATE		
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS AND DIREC			
1.TLE	RUBEL, JANICE B.	☐ DELETE	1.1 7171				Change	Addition	
NAME DIGGET ABBIDGES	6955 N.W. 36TH AVENUE		1.2 NA						
STREET ADDRESS CITY-ST-ZIP	MIAMI FL			EET ADDRESS Y-ST-ZIP					
TITLE	\$	DELETE	2.1 (1)		┼──	· · · · · · · · · · · · · · · · · · ·	Change	Addition	
NAMÉ	Castillo, Sandra		2.2 NA	AE.					
STREET ADDRESS	6955 NW. 36 AVE.		2.3 STF	EET ADDRESS	1				
City - St - 7IP	MIAMI FL		2 4 CI	Y-ST-ZIP					
THLE		DELETE	3 1 TH	.E	SD		☐ Change	Addition	
NAME			3.2 NAI	- 		DALDA FERRER	ATTT		
STREET ADDRESS				EFT ADDRESS	1	55 N.W. 36th AVE AMI, FL 33147	auni		
COY-ST-76P TILLE	The state of the s	DELFTE	3.4. CH 4.1 TITI	Y-\$1-ZIP	MIL	AMI, FL 33147	Change	Addition	
NAME			4, 2 NA	-					
STREET ADDRESS				EET ADDRESS					
CHY-ST-ZIP			4.4 CIT	Y-ST-21P	<u> </u>				
TITLE		☐ DELFTE	5.1 TITI	E			Change	Addition	
NAM !			5.2 NA	AE					
STREET ADORESS				EET ADORESS					
CITY ST-71°		DELETE		Y-ST-ZIP	 		Chann	Addition	
TIFLE		L DELETE	6 1 TITI				Change	L. Audition	
NAME STREET ADDRESS			62 NAI	ME BEET ADDRESS					
CITY-ST-ZIP				Y-ST-ZIP					
14 Ldo hereb	by certdy that the information supplied	d with this filing does not qua	lify for the r	exemption s	stated in	Section 119.07(3)(i), Florida Statute	s. I further certify tha	at the	
informatio Lam an ol	by certify that the information supplied on indicated on this annual report or s flicer or director of the corporation or in Block 12 or Block 1211 changed, or	upplemental annual report is	true and a	exemption s covrate an secure this	stated in that my report as	Section 119.07(3)(i), Florida Statute signature shall have the same lega required by Chapter 607, Florida	s. I further certify that I effect as if made ustatutes; and that my	it the nder oath; th name	

SIGNATURE:

THE AND TYPEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Dayting Frome Proper OR DIRECTOR