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PROFIT CORPORATION ANNUAL REPORT

1996



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

DOCUMENT	#
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IMPE	n Name RIAL NUR	SERY, INC.							
Principal Place	e of Business		Mailing Add	ress			ı indini dişibi idind dişili Balişi id		II Dioir Bibli Groot IDD
3528 W 14TH LANE HIALEAH FL 33012-1724			3528 W 14TH LANE HIALEAH FL 33012-1724						
6 Principal Di	(B)						3. Date Incorporated or Qualified 12/02/1978	3a. Date of La 05/0	st Report 1/1995
2. Principal Pl	iace of Busines	SS	2a. Mailing A	Address			4. FEI Number 59-1865422		Applied For Not Applicable
Suite, Apt.	#, etc.		Suite, Ap	ot. #, etc.			5. Certificate of Status Desired	1 1	.75 Additional
City & State	е		City & St	ate			Election Campaign Financing Trust Fund Contribution	\$ <u>\$</u>	5.00 May Be
Zip		Country	Zip		Countr	у	8. This corporation has liability for		or s 199.032,
4		:5	29		30		Florida Statutes Yes	. 	
	9, Name 8	and Address of Curr	ent Hegistered Ag	ent		II Noses	10. Name and Address of New R	legistered Agent	
מנומם	Λ I00E I				81	Name			
	O, JOSE L. W 14TH LAN	IE			82	Street Add	iress (P.O. Box Number is Not Acceptab	ole)	···········
		A D 33012-1724			83				T
i ii/iLL/	** 1, 1 LOIND				ļ				
					84	City		FL 85	Zip Code
						named corpo poration's boa	pration submits this statement for the pure		its registered office
familiar wit	th, and accept	ns of Sections 607.050 oth, in the State of Fic the obligations of, Se	ction 607.0505, Flor	ida Statutes	ed by trie corp i.	poration's boa	ard of directors. I hereby accept the appo	pose of changing pintment as registe	its registered office ered agent. I am
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SIGNATURE:

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 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.

GNATURE:

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