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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

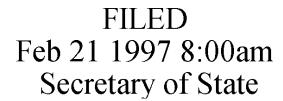
DOCUMENT # 600648

(0)

RINELLA, HUDANICH, GREENBERG, RALPH & SIJIN, P.A

Principal Place of Business

Mailing Address





333 NW 70 AVENUE, SUITE 120 PLANTATION FL 33317		333 NW 70 AVENUE. SUITE 120 PLANTATION FL 33317-2391							
						3. Date Incorporated or Qualified 12/11/1968		e of Last F 2/1996	Report
2. Principal Pl	lace of Business	2a. Mailing Address			4. FEI Number	-	A	pplied For	
21		26				64-0471804		N	lot Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 Additional Fee Required		
City & State	6	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip 24	Country 25	Ζιρ 29	30			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No			
	9. Name and Address of Curre	nt Registered Agent	8			10. Name and Address of New Reg	pistered A	gent	
RINELLA, JOHN L.					Name				Ī
333 NW 70 AVENUE #120 PLANTATION FL 33317				2	Street Addre	ddress (P.O. Box Number is Not Acceptable)			
			8	3					
			8	4 (City		FL	85 Zip	Code
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statute	s, the abo	ve-r	named corpo	oration submits this statement for the p	urpose of	changing	its registered
office or ri agent Lai	egistered agent for both, in the Stat im familiar with, and accept the obti	e of Florida. Such change was a gations of, Section 607.0505, Flo	uthorized i rida Statut	oy II es.	ne corporati	on's board of directors. I hereby accep	t the appo	intment as	s registered
SIGNATURE		•				4.			
SIGNATORE	Signature, typed or printed name of registered a	gent and title if applicable. (NOTE	Registered A	gent :	signature require	od when reinstating)	DATE		
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND		
TIFLE	PD	DELETE	1.1 TITLE					Change	Addition
NAME	RINELLA, JOHN L		1.2 NAM	Ε					1
STREET ADDRESS	4900 W. BROWARD BLVD.		1.3 STRE	ET AD	DDRESS				Į;
C(TY-ST-7)P	PLANTATION FL		1.4 CITY	- \$1-	ZIP				
TITLE	VD	DELETE	2.1 TITLE	Ξ		•		Change	Addition
NAME	HUDANICH, R		2.2 NAM	E		e e			
STREET ADDRESS	9420 N.W. 10TH ST.		2.3 STREE		ODRES\$				
CITY-ST-ZIP	PLANTATION FL		2.4 CITY	/-ST-	· ZIP				
TITLE	SD SD	☐ DELETE	31 TITLE	Ξ				L Change	L.] Addition
NAME	GREENBERG, WARREN M.		3.2 NAM	E	1				
STREET ADDRESS	6000 S.W. 17TH STREET		3.3 STAE	ET AD	DORESS				
CITY-ST-ZIP	PLANTATION FL		3.4. CITY		ZIP				
TITLE	TD	☐ DELETE	4,1 TITLI		ŀ	,		L Change	Addition
NAME	RALPH, JONATHAN		4. 2 NAN	AΕ					i
STREET ADDRESS	1250 S.E. 2 ST		4,3 STRE	ET AD	ODRESS			*	ļ
CITY-ST-ZIP	FT. LAUDERDALE FL		4,4 CITY		ZIP				
TITLE	VD	☐ DELETE	5.1 TITU				!	Change	Addition
NAME	SIJIN, ODALIS		5.2 NAM						-
STREET ADDRESS	7400 SW 5TH STREET		5.3 STRE						•
CITY+ST-ZIP	PLANTATION FL	T serve	5.4 CITY		ZIP			100000	4.500
TITLE		DELETE :	6.1 TITLI			•	:	L Change	Addition
NAME			6.2 NAM		1		1		
STREEL ADDRESS			6,3 STAE						ĺ
CITY-ST-ZIP			6.4 CITY	- ST-	ZIP		**************************************	 	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 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.

SIGNATURE

SIGNATURE DO TYPED OR PRINCED NAME OF SIGNING OFFICER OR DIRECTOR

12-17-97 1954-191-281