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

PROFIT CORPORATION ANNUAL REPORT



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

1996

1. Corporatio	MENT # 62057 O & JULIET MARKETING O	\- /				I Pâu âlan bidli ana	II BIBII BIBII BIBII WAN
Principal Place of Business Mailing Address							
9241 CARIBBEAN BOULEVARD MIAMI FL 33157		9241 CARIBBEAN BOULEVARD MIAMI FL 33157					
					3. Date Incorporated or Qualified 05/09/1979	3a. Date of L	ast Report /1995
2. Principal Place of Business		2a. Mailing Address			4. FLI Number		Applied For
Surte, Apt. #, etc. Suite, Apt. #, etc				59-1401553	<u> </u>	Not Applicable	
22					5. Certificate of Status Desired	1 1	8.75 Additional Fee Required
	City & State		Oty & State		6. Election Campaign Financing	\$	5.00 May Be
23 Zip	Country	28 Zip	Country		Trust Fund Contribution		Added to Fees
24	25	29	30 Codiney		8. This corporation has liability for Florida Statutes Yes		ders 199 032,
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New F		ıt -
11. Pursuant or register familiar wi	L 33157 to the provisions of Sections 607,0503 ed agent, or both, in the State of Borth, and accept the obligations of, Sect	P and 607.1508, Florida Statu da Such change was author ion 607.0505, Florida Statute	too the skews so	City med corpora ation's board	ation submits this statement for the pu d of directors. Thereby accept the app	FL 85 pose of changing ointment as regis	
SIGNATURE	Styrad zo, typed or protect carrie of augmentic appro		COL Bagista of Agains	grafice required	while renefit that	DATE	
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OFF		
NAME	TRACY, WILLIAM A. ,JR.	☐ DELETE	1 1 TITLE 12 NAME			☐ Cha	ange 🔲 Addition
STREET ADDRESS	9241 CARIBBEAN BLVD.		1.3 STREET AL	MEESS			
CITY-SI-ZIP	MIAMI FL		1.4 CHY - ST-	·			
TITLE	STD	DELETE	2 1 THGE	·····		☐ Cha	inge 🔲 Addition
NAME	TRACY, JULIA E.		2.2 NAME				
STREET ADDRESS	9241 CARIBBEAN BLVD. MIAMI FL		23 STREFT AL	DRESS			
CITY-ST-ZIP TITLE	VD	☐ DELETE	2.4 CHY ST	ZIP			
NAME	TRACY, MATTHEW E.		3.2 NAME			☐ Cha	inge
STREET ADDRESS	9241 CARIBBEAN BLVD		33 STHEFT AS	DORESS			
CITY-S1-ZIP	MIAMI FL		34 CITY SF-2	71F-			
TITLE		☐ DELETE	4 1 Tur _s e			☐ Cha	nge 🔲 Addition
NAME			4.2 NAME				
STREET ADDRESS			4.3 STREET AD	1			
Offy-ST-ZIP TITLE		DELETE	4.4 C:TY -ST 2 5.1 TITLE	?IP		F1 C	non [] (4d));
NAME		LJorean	5 2 NAME			☐ Cha	nge 🔲 Addition
STREEL ADDRESS			53 STREET AD	LIBESS			
CITY - ST - ZIP			5.4 C/1Y ST 2				
TITLE		DELETE	6 1 III.E	-		☐ Cha	nge 🔲 Addition
NAME			6.2 NAME			_	
STREET ADDRESS			63 STREET AD	DRESS			f
CITY-ST-ZIP	y certify that the information convolution	The state of the s	6.4 CHY-S1-Z	iP L			

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). Fiorida Statutes I further certify that the information indicated on this annual report or supplien-ental 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: William A. Truey to - William A. TRACY JR - 4/30/96 305/2526744