FILE NOW: FILING FEE AFTE PROFIT CORPORATION ANNUAL REPORT			FLORIDA DEPARTMENT OF STATE		FILED Aug 27 1997 8:00am	
				B. Mortham ary (of State	Secretary of State	
	1997			CORPORATIONS		hary of State
J/L REA	MENT # 68 NTY, INC.	56142	(7)			
120 LAUREL F HOLLYWOOD US	ROAD	HIXS 1610	5			
					3. Date Incorporated or Qualif 02/07/1980	lied 3a. Date of Last Report 05/01/1996
2. Principal F	Place of Business	2a. M	ailing Address		4. FEI Number 59-1977367	Applied For
Suite, Apt.	#, etc.		uile, Apt. #, etc.		5. Certificate of Status Desired	S Sector
City & Stat	e		ity & State		6. Election Campaign Financir	ng \$5.00 May Be
Zip 24	Countr	y 7	φ	Country		/ for intengible tax under s. 199.032,
24	25 9. Name and Addre	29 29 Ss of Current Register	ed Agent	30	Florida Statutes , 10. Name and Address of New	Ves No
11. Pursuant office or r agent. La	to the provisions of Sec registered agent, or bolt m familiar with, and acc	tions 607 0502 and 607. n, in the State of Florida ept the obligations of, S	1508, Florida Statu Such change was lection 607.0505, F	83 84 City tes, the above-named cc authorized by the corpor lorida Statutes.	rporation submits this statement for I ation's board of directors. I hereby a	FL 85 Zip Code Ihe purpose of changing its registered ccept the appointment as registered
SIGNATURE		e of registered agent and ble it a		11 - Registe od Agent signature reg		DATE
12. TITLE	0 DV	FFICERS AND DIRECTO		13.	ADDITIONS/CHANGES TO O	DEFICERS AND DIRECTORS IN 12
NAME STREET ADDRESS City-st-zip	Lehrer, Sylvia 120 Laurel RD. Hollywood, FL)		1.2 NAME 1.3 STREET ADDRESS 1.4 City-S1-Zip		
TITLE NAME	ST Lehrer, Jacques	3	DELETE	2 1 1ITUE 2 2 NAME		Change Addition
STREET ADDRESS	120 LAUREL RD. HOLLYWOOD, FL I	0		2 3 STREET ADDRESS		
City-st-zip Title Name			DELFIE	2. 4 CITY - ST - ZIP 3.1 TITLF 3.2 NAME	,,,,,,,	Change Addition
STREET ADDRESS				3.3 STREET ADDRESS		
CITY-ST-ZIP TITLE			DELETE	3.4. CITY - ST - ZIP 4.1 TITLE		Change Addition
NAME STREET ADDRESS				4. 2 NAME 4.3 STREET ADDRESS		
CITY-SI-ZIP				4.4 CITY - ST-ZIP		
TITLE NAME STREET ADDRESS			DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS		Change [] Addition
CITY-ST-ZIP				54 CITY- ST- ZIP	······································	
TITLE NAME				6 1 THLF 6 2 NAME		Change 🛄 Addition
STREET ADDRESS				6.3 STREET ADDRESS		
City-St-ZIP 14. do heret	by certify that the inform	ation supplied with this f	iling does not quali	6.4 CITY-ST-ZIP If for the exemption state	ed in Section 119.07(3)(i), Florida Sta	lutes. I further certify that the
informatio I am an ol appears i	n indic ated on this annu flicer or director of the c n Block 12 or Block 13 i	al report or supplement ornoration witho receive changed, or on an atla	at annual aport is t ar or tructou empoy chright with an ad-	true and accurate and the vered to execute this rep dress.	at my signature shall have the same ort as required by Chapter 607, Florid	logal effect as if made under oath; that logal statutos; and that my name