FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # 727

1. Corporation Name

727372

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11 1110.				
Principal Place of Business	Mailing Address		A THE IT I I WANT THAT I INTO EACH IN	ME WIRIT ATAIN BERTI ALBEI ALAEI RONTE IAAF
2525 N.W. 20TH ST. FORT LAUDERDALE FL 33311 US	2525 N.W. 20TH ST. FORT LAUDERDALE FL 33311 US	-3410		
			3. Date Incorporated or Qualified 09/05/1973	3a. Date of Last Report 03/02/1996
2. Principal Place of Business	2a. Mailing Address		4. FEI Number 65-0365669	Applied For
21	26	··············	65 0505009	Not Applicable \$8.75 Additional
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	Fee Required
City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23	28		Trust Fund Contribution	Added to Fees
Zip Country	Zip	Country	8. This corporation has liability for	
24 25	29 3	<u>ol</u>		Yes No
9. Name and Address of	of Current Registered Agent	81 Name	10. Name and Address of New Re	Sistated Wilett
414 EN W 050D05 500			<u> </u>	
ALLEN, W. GEORGE, ESQ. One river plaza, STE 701		82 Street Ac	ddress (P.O. Box Number is Not Acceptab	le)
305 S ANDREWS AVE		83		
FI. LAUDERDALE FL 33301		54 67		85 Zip Code
		84 City	•	FL 85 Zip Code
Pursuant to the provisions of Sections office or registered agent, or both, in agent. I am familiar with, and accept SIGNATURE Signature, typed or printed name of res.	the State of Florida. Such change was aut the obligations of, Section 617.0503, Flori	, the above-named or thorized by the corpo da Statutes.	ration's board of directors. I hereby accep	ot the appointment as registered
	CERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	
TITLE PD	DELETE	1.1 TITLE	Cannus BIIS	Change Addition
NAME PHILLIPS, VICTOR		1.2 NAME	FREDIE MALE	N / Y
STREET ADDRESS 551 N W 17TH ST	14. 44 . Q-1	1.3 STREET ADDRESS	524 N.W. 3 mg	OURT
CITY-ST-ZIP POMPANO BEACH FL	. while man	1.4 CITY-ST-ZIP	<i>Handudale</i> , F	10.33009
TITLE	POELETE	2.1 TITLE		Change Addition
NAME	and the state of t	2.2 NAME		
STREET ADDRESS	As the second second	2 3 STREET ADDRESS	and the second s	
TITLE TD	DELETE	2.4 CITY - ST - ZIP 3.1 TITLE		☐ Change ☐ Addition
NAME MCCRAY, MATTHEW		3.2 NAME		
STREET ADDRESS 5515 MAYO ST.	11	3.3 STREET ADDRESS		
CITY-ST-ZIP HOLLYWOOD FL	Willow	3.4. CITY - ST - ZIP		,
TITLE S	DELETE	4.1 TVLE		☐ Change ☐ Addition
NAME PHILLIPS, VICTOR A.	J , , ,	4.2 MME		
STREET ADDRESS 551 NW 17TH ST.	has been to	4.3 TREET ADDRESS		
CITY-ST-ZIP POMPANO BCH. FL	Total Alexander	4.4 TY-ST-ZIP		Change Addition
FITLE	C Decreies	5.10 LE		C Charge C Addition
NAME		5 EET ADDRESS		
STREET ADDRESS	The same of the sa	S V-ST-ZIP		
CITY-ST-ZIP	DELETE	6 E		Change Addition
NAME		6 3 ME	•	
STREET ADDRESS		6. REET ADDRESS		
CITY-ST-ZIP		6. FY-ST-ZIP		
	or supplied with this filing does not qualify	for inexemption star	ted in Section 119.07(3)(i), Florida Statute hat my signature shall have the same lega	s. I further certify that the
I am an officer or director of the corp	oration or the receiver or trustee empower	red to execute this rep	ted in Section 119.07(3)(), Florida Statute hat my signature shall have the same lega port as required by Chapter 617, Florida S	tatutes; and that my name

SIGNATURE:

NATURE AND TOPRIOR PRINTED MARKE SARGHING OFFICER ON DIRECTOR

Daytime Phone # 0034627

Date

FILED

Feb 19 1997 8:00am

Secretary of State

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