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 # 7

728838

(4)

FILED

APPROVED

97 APR 30 PM 12: 56 SECRETARY OF STATE TALLAHASSEE, FLORIDA

THE F	EZ CLUB INC.				
Principal Plac	ce of Business	Mailing Address			00) B1851 B1861 B1861 B1861 B1861 1881
2300 CORAL W MIAMI FL 3314 US		2300 CORAL WAY MIAMI FL 33145-3511 US			
				02/15/1974	Date of Last Report 07/24/1996
· ·	Place of Business CORAL WAY	2a. Mailing Address 26 2300 CORAL W	/AY	4. FEI Number 59-2434193	Applied For Not Applicable
Suite, Apt 200	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
Crty & Stat 23 MIAMI		City & State 28 MIAMI FLORID)A	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 33145	Country US	Zip	Country US	8. This corporation has liability for Intar-	
	9. Name and Address of Curre			10. Name and Address of New Regists	
			81 Name		
FLORIDA ANNUAL REPORT SERVICES, INC. 2300 CORAL WAY			82 Street Addr	ress (P.O. Box Number is Not Acceptable)	
SUITE #	₹200		83		
MIAMI F	FL 33145		84 City		FL 85 Zip Code
11. Pureuant	to the provisions of Sections 617.05	502 and 617.1508, Forida Statute	s, the above-named corp	poration submits this statement for the purpo	se of changing its registered
office or i	registered agent or both, in the State	A of Florida, Such change was au	uthorized by the corporat	poration submits this statement for the purpo- tion's board of directors. I hereby, accept the	appointment as registered
SIGNATURE		AMAT	A CANTERA LOF	PEZ_PRES $4/23/$	97
SIGNATORE		port and tile if applicable. (NOTE	Registered Agent signature requir	red when reinstating) / D/	ITE
12.	· · · · · · · · · · · · · · · · · · ·	ND DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12 Change Addition
TITLE	PSD HODYTHOLA	T) DEFEIG	1.1 TITLE		Cusude Ci voquon
NAME	VIDAL, HORTENSIA		1.2 NAME		
STREET ADORESS	310 N.W. 13 AVENUE		1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		Change Addition
TITLE	D DOLANDO	L DELETE	2.7 TITLE 2.2 NAME	5000021E -05/06/97	Change Addition
NAME OXOCCY ADDROCCO	VIDAL, ROLANDO			-05/06/97	01106002
STREET ADDRESS	310 N.W. 13 AVENUE		2.3 STREET ADDRESS	******61.7	25 *****61.25
CITY-ST-ZIP TITLE	MIAMI FL	DELETE	2.4 CITY-ST-ZIP 3.1 TITLE		Change Addition
NAME	VIDAL, ROBERTO JR.	Fill were in	3.2 NAME		mit averige that continue
STREET ADDRESS	310 N.W. 13 AVENUE		3.3 STREET ADDRESS		
City-St-Zip					
TIME	MIAMI FI.				
	MIAMI FL	☐ DELETE	3.4. CITY - ST - ZIP 4.1 TITLE		☐ Change ☐ Addition
NAME	MIAMI FL	☐ DELETE	3.4. CITY-ST-ZIP		☐ Change ☐ Addition
(#	MIAMI FL	☐ DELETE	3.4. CITY - ST- ZIP 4.1 TITLE		Change Addition
NAME	MIAMI FL	_	3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME		☐ Change ☐ Addition
NAME TREET ADDRESS	MIAMI FL	☐ DELETE	3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE		☐ Change ☐ Addition
PAME PIREET ADDRESS GITY-ST-ZIP	MIAMI FL	_	3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE	h \00	
NAME PIREET ADDRESS GHY-S1-ZIP TULE	MIAMI FL	_	3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE	Qy/30	
NAME JIREET ADDRESS GITY-ST-ZIP TITLE NAME	MIAMI FL	☐ DELETE	3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE	Jay 130	☐ Change ☐ Addition
NAME PIREET ADDRESS GHY-S1-ZIP TITLE NAME STREET ADDRESS	MIAMI FL	_	3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE	Jay 130	
NAME FIREET ADDRESS CHY-S1-ZIP TITLE NAME STREET ADDRESS CHY-S1-ZIP	MIAMI FL	☐ DELETE	3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	Jay 130	☐ Change ☐ Addition
NAME JIREET ADDRESS GITY-S1-ZIP TITLE NAME STREET ADDRESS GITY-ST-ZIP TITLE	MIAMI FL	☐ DELETE	3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE	Jay 130	☐ Change ☐ Addition

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

MAJURE AND TIPE OR MINTED NAME OF BIGNING OF JOER OR DIRECTOR

1/23/97 Date Daytime

Daytime Phone # 0030347