	D NOTICE: CORPORATION WILL BE D E ON OR BEFORE 09/15/99: \$61.25 (IF DISS	ISSOLVED ON OR AFTER SEP OLVED, MINIMUM AMOUNT DUE TO	TEMBER 15, 1999. D REINSTATE: \$236.25).			F
COR	ONPROFIT RPORATION JAL REPORT	FLORIDA DEPART Kathering Secretary	e Harris		y of State	nm
	1999	DIVISION OF CO	ORPORATIONS	09-16-1999 900	003 022 ****70.00	
DOCUN 1. Corporation	MENT # 740535	V				
DOC, IN		•				
Principal Place	e of Business	Mailing Address				
	Kurzban & Weinger Th ave. 2nd Floor 33	% KURZBAN, KURZBAN & 2650 S.W. 27TH AVE. 2ND MIAMI FL 33133				
	ace of Business	2a. Mailing Address		3. Date Incorporated or Qualifed 09/20/1977		
21 Suite, Apt.	#, etc.	Suite, Apt. #, etc.	<u> </u>	4. FEI Number 59-1793431	Applie	
22 City & State	9	27 City & State			\$8:75 Add	
23		28 Zip	Country		Fee Requir	
Zip 24	Country			6. Election Campaign Financing Trust Fund Contribution	Added to F	
	9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Re	gistered Agent	
KURZBAN	1, IRA J., ESQ.			dress (P.O. Box Number is Not Acceptab	le)	
2650 S.W	I. 27TH AVE. 2ND FLOOR		83			
	33433					
miami fl					85 Zip Cod	e
	047 0F00	and 647 4509 Elorida Stabuta	84 City	moration submits this statement for the n	FL 85 Zip Cod	istered
11. Pursuant I	to the provisions of Sections 617.0502	f Florida - Such change was aut	84 City	rporation submits this statement for the pution's board of directors. I hereby accept	FL	istered
11. Pursuant i office or re agent. I ar SIGNATURE	to the provisions of Sections 617.0502 egistered agent, or both, in the State o m familiar with, and accept the obligation	f Florida. Such change was aut ons of, Section 617.0503, Floric	84 City the above-named cor- horized by the corpora ta Statutes.		FL urpose of changing its reg the appointment as registe	istered ered
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officer or director of th Block 12 or Block 13 i	he corporation or the receiver or trustee empowered to execute this report as required by Chapter if changed, or on an attachment with an address, with all other like empowered.	01
SIGNATURE:	Ensighter RERICIRT DSOL BERG	
	SIGNATURE AND TIPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	

9/9/99 7/3-529-1/27 Day Dayume Phone #