FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

747282

(2)

CENTL	JRY 21 DADE COUNTY AD	vertising council, II	NC.		HÁL ÁRAN ARAN ARAN ARAN BRAN BRAN ARAN KAR
Principal Plac	e of Business	Mailing Address			
3100 N.W. 77TH COURT MIAMI FL 33122-1115		7700 N. KENDALL DR. STE. #505 MIAMI FL 33156-7566			
		US		3. Date Incorporated or Qualified 05/21/1979	3a. Date of Last Report 03/05/1996
2. Principal P	Place of Business	2a. Mailing Address 26		4. FEI Number 59-1952880	Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	e	City & State	· - · ·	6. Election Campaign Financing	\$5.00 May Be
23 Zip	Country	28] Zip	Country	Trust Fund Contribution	Added to Fees
24	25	F-7 F	30	8. This corporation has fiability for i	intangible tax under s. 199.032, Yes XLNo
, ,	9. Name and Address of Currer			10. Name and Address of New Reg	
		<u> </u>	81 Name		<u>,</u>
JOHNSON, GWEN 82 Street Add				Iress (P.O. Box Number is Not Acceptab	ole)
20332 NW 2ND AVE MIAMI FL 33169					<u></u>
MIAMI F	L 33169				
	,		84 City		FL 85 Zip Code
11. Pursuant office or r agent. I a	to the provisions 15 ctions 61/ 050 egistered agent // both/ in the state im familiar with, and becapt the oblig.	i2 and 617.1508, Florida Statuler of Florida Such change was au ali¢ns of, Section 617.0503, Flor	s, the above-named cor thorized by the corpora ida Statutes.	poration submits this statement for the palion's board of directors. I hereby accept	urpose of changing its registered of the appointment as registered
SIGNATURE	+ + Marzo	\prec			
12.		en and tille if applicable (NOTE DIDRECTORS	Hegistered Agrest signadure requi		DATE
TITLE	TD COMMON TO	DELETE	1.1 101.6	ADDITIONS/CHANGES TO OFFIC	Change Addition
NAME	GWEN, JOHNSON		1.2 NAME		Change C Addition
STREET ADDRESS	20332 N.W. 2ND AVE.		1.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33169		1.4 CiTY - ST - ZIP		
TITLE	PD	DELETE	2.1 TITLE		Change Addition
NAME	MOORRA, GEORGES		2.2 NAME		
STREET ADDRESS	13975 NW 67TH AVE		2 3 STREET ADORESS		
CITY-ST-ZIP	MIAMI FL		2 4 CITY - ST - ZIP		
TITLE	Vτ	DELETE	3.1 TITLE	The state of the s	Change Addition
NAME	GUERRA, RICARDO		3.2 NAME		
STREET ADDRESS	MILLER SQUARE, 13790-6 SV	V 56TH ST	3.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL	Thrift.	3 4. C(1Y - S1 - Z(P		
TITLE	VT CALAC LADDY	☐ DELFTE	4.1 101LE		☐ Change ☐ Addition
NAME Street address	SALAS, LARRY 8415 CORAL WAY STE.#203		4 2 NAME		
	MIAMI FL 33155		4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	MINIMI I E OO 100	DELEVE	4.4 GETY - ST - ZIP 5.1 TITLE		Change Addition
NAME		- Milli	5.2 NAME		☐ Griange ☐ Audition
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5 4 CITY-ST-ZIP		
TITLE		DELETE	61111(F		Change Addition
NAME		<u> </u>	62 NAME		cronge Addition
STREET ADDRESS			63 STREET ADDRESS		
CITY-ST-ZIP			64 CITY - ST - 7IP		

FILED

Jan 30 1997 8:00am

Secretary of State

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 opporation 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 ft chapter 617, or on an attachment with an address.