FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:

SIGNATURE AND TYPED OF



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Jan 24 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 815989

(9)

TWERY	S INC.				
Principal Place	c of Business	Mailing Address			T BADAL BABAL BABAH BABAH BABAH BABAL BABA
180 NORTHEAST 40 STREET 160 NORTHEAST 40 STRE MIAMI FL 33137 MIAMI FL 33137-3512			•		
				3. Date Incorporated or Qualified 02/12/1962	3a. Date of Last Report 03/19/1996
2. Principal Pl	lace of Business	2a, Mailing Address		4. FEI Number	Applied For
21		26		13-5447508	Not Applicable
Suite, Apt	#, etc	Suite, Apt. #, etc		5, Certificate of Status Desired	\$8.75 Additional
City & State		City & State			Fee Required
23	3	28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for	
24	25	29	30		Yes No
	g. Name and Address of Curre	ent Registered Agent		10. Name and Address of New Re	
	r, seth		81 Name		
	NE 40TH ST.		82 Street A	ddress (P.O. Box Number is Not Acceptal	ole)
MIAJ	MI FL 33137			· · · · · · · · · · · · · · · · · · ·	
			83		
			84 City	*****	B5 Zip Code
11 Pursuant t	to the provisions of Sections 607.05	02 and 607 1508 Florida 9	tatutes the above named	corporation submits this statement for the	
office or re agent. I a	egistered agent, or both, in the State m familiar with, and accept the obl-	te of Florida Such change gations of Section 607.050	was authorized by the corp 5, Florida Statutes.	corporation submits this statement for the oration's board of directors. I hereby acce	pt the appointment as registered
SIGNATURE					
	Signature: type-dioriprinted name of registered a		(NOTE Registered Agent signature)		DATE
12. TITLE	DS OFFICERS A	ND DIRECTORS DELETI	13.	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12
NAME	EBER,BERTHA		1.2 NAME		Change D Addition (
STREET ADDRESS	160 NE 40 ST.		1.3 STREET ADDRESS		[8
CITY-ST-ZIP	MIAMI BEACH FL		1.4 CITY-ST-ZIP		
TITLE	PVD	DELET			Change Addition
NAME	eber,seth		2.2 NAME		
STREET ADDRESS	160 NE 40 ST.		2.3 STREET ADDRESS		
CITY - ST - ZIP	MIAMI BEACH FL	<u></u>	2. 4 CITY-ST-ZIP		
TITLE		☐ DELET	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-S1-ZIP		DELET	3.4. CfTY - ST - ZIP		Change Addition
TITLE NAME		יי הנונוו	I		Change Addition
STREET ADDRESS			4. 2 NAME 4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE	,	DELET		-11000000000000000000000000000000000000	Change Addition
NAME			5.2 NAME		, –
STREET ADDRESS			5.3 STREET ADDRESS		
CITY - ST - ZIP			5.4 City-St-ZiP		
TITLE		DELET	6.1 TITLE		Change Addition
NAME			6.2 NAME		1
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY+ST-ZIP		
14. I do herek informatio I am an of appears in	by certify that the information suppli ri indicated on this armual report or ficer or director of the corporation on In Block 12 or Block 13 if changed,	ed with this filing does not supplemental annual repo or the receiver or trustee er or on an abachment with a	qualify for the exemption st it is true and accurate and inpowered to execute this re in address.	ated in Section 119.07(3)(i), Florida Statute that my signature shall have the same leg- eport as required by Chapter 607, Florida	es. I further certify that the al effect as if made under oath; that Statutes; and that my name