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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Feb 24 1997 8:00am

Secretary of State

8/14/97 (305) 529-1500

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F11710

(3)

DOREDT DW LANDON IL DA

Principal Place of Business Mailing Address 550 BILTMORE WAY 550 BILTMORE WAY SUITE 810 SUITE 810 CORAL GABLES FL 33134 CORAL GABLES FL 33134-573 US				, I		te of Last Report
2. Principal Place of E	Business	2a. Mailing Address			4, FEI Number	Applied For
21		26			59-2047138	Not Applicable
Suite, Apt #, etc.		Suite, Apt. #, etc.	·)		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & State		City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23	- 1 Country	28	Carratar		Trust Fund Contribution	Added to Fees
Z(p)	Country 25	Zip 29	Country 30		8. This corporation has liability for intangible Florida Statutes Yes	tax under s. 199.032,
	ame and Address of Current		[30]		10, Name and Address of New Registered A	
The state of the s				ame		
550 BILTMORE WAY				reet Addre	ess (P.O. Box Number is Not Acceptable)	
SUITE 810					(() () () () () () () () () (
CORA GAB	LES FL 33134		83			
			84 C	ity	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	85 Zip Code
at Thus cost to the re-	which as the stone COZ OF OC	and CO7 1500 Florida Chat 4			FL	
Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I arm farm-liar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typical or printed name of mg stered agent and to a it applicable. (NOTE: Registered Agent signature required when reinstating) DATE						
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12
TITLE DP	ALL BAREST B W II	[] DELETE	1.1 ¶TL€			Change Addition
	ON, ROBERT D W, II	•	1.2 NAME	•		
000	BILTMORE WAY SUITE 810 AL GABLES FL		1.3 STREET ADD			
City+ST-ZiP CON	IL OPDILO I L	DELETE	1.4 CITY - ST - ZIE 2.1 TITLE	<u> </u>		Change Addition
NAME		Car Decent	2.2 NAME			The production
STREET ADDIRESS			2.3 STREET ADD	RESS		
DITY - S1 - ZIP			2. 4 CITY - ST - ZI	1		
THLE		DELETE	3.1 TITLE			Change Addition
NAME		•	3.2 NAME			
STREET ADDRESS			3.3 STREET ADD	RESS		
CHY-ST-ZIP		Decision	3.4. CITY - ST - ZI	P		
TITLE		DELETE	4.1 TITLE			Change Addition
NAME STREET ADDRESS			4. 2 NAME	DECC.		
CITY-ST-ZIP			4.3 STREET ADD			
TITLE		DELETE	4.4 CITY - \$1 - ZIF 5.1 TITLE	-		Change Addition
NAME		-	5.2 NAME		•	
STREET ADDRESS			5.3 STREET ADD	RES\$		
CrTY - ST - ZiP			5.4 CITY - ST - ZIE			
TITLE		☐ DELETE	6.1 TITLE			Change Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADD			
CHY-ST-ZIP 14. I do hereby certify	that the information supplied	with this line does not qualif	6.4 CITY-ST-ZIF	ion stated	in Section 119 07/9/0 Florida Section 15 office	partify that the
14. I do hereby certify that the information supplied with this fling 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 sport 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 directory if the corporation by the receiver or true exemption and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or directory if the corporation by the receiver or true exemption stated and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or directory if the corporation by the receiver of the corporation by the						