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

CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # F47269

(8)

PAUL POLIQUIN, P.A.

A COMPANDE PARA OCUME COMUN CENTRO MECCO CARA DEDIR ACCOLOGRAPA DE PER ESPACA DE DEL COMUN DE DE COMUN DE DESCRIPCION DE DESCR

FILED Apr 14 1997 8:00am Secretary of State

Principal Place of Business Mailing Address						T INDUIND SENT BARAN NOONE HIND DUNI	i idil didil didil di		#1#11 (#B)
7901 LUDLAM			7901 LUDLAM RD #207						
SOUTH MIAMI	FL 33 143	SOUTH MIAMI	SOUTH MIAMI FL 33143-4542						
					**	3. Date Incorporated or Qualifi 09/23/1981	ad 3a. Date 04/2	of Last Ro 5/1996	eport
2. Principal Pl	ace of Business	2a. Mailing Ac	2a. Mailing Address			4. FEI Number Applied For			
21		26				59-2123267 Not Applicable			
Sulte, Apt.	#, etc.	Suite, Apt.	Suite, Apt. #, etc.			5. Certificate of Status Desired \$8.75 Additional			
22		27				ree nequired			
City & State)		City & State			6. Election Campaign Financing \$5.00 May Be			
23 Zip	Country		Zip Country			Trust Fund Contribution Added to Fees			
	<u> </u>	h1	29 30			B. This corporation has liability for inlangible tax under s. 199.032, Florida Statutes Statutes No			
24]	25 25 Name and Address of 0					10. Name and Address of New			
P∩L	IQUIN, PAUL		-	81	Name				
7901	LUDLAM RD #207					Need Address (D.O. Day Number in Not Assessable)			
	AMI FL 33143		82 Street Ad			dress (P.O. Box Number is Not Acceptable)			
J 1,111				83					
								1051 75.7	Code
				84	City		FL	85 Zip C	.oae
l office or r	enistered agent, or both, in the	: State of Florida, Such ct	ange was autho	onzed by	the corpora	poration submits this statement for tition's board of directors. I hereby a	ne purpose of cocept the appo	hanging its	s registered registered
agent I a	m familiar with, and accept the	obligations of, Section 6	07.0505, Florida	Statutes	i.	•	,		
SIGNATURE	Signature typed or printed name of regist	ored anent and title it abrilicable	(NO1E: Rog	istered Age	nt signature regu	ired when reinstating)	DATE		
12.		RS AND DIRECTORS		13.		ADDITIONS/CHANGES TO O	FFICERS AND	DIRECTOR	S IN 12
TITLE	PTS		DELETE	1.1 TITLE			Ţ	Change	Addition
NAME	POLIQUIN, PAUL			1.2 NAME					į
STREET ADDRESS	7901 LUDLAM RD #207		1.3 \$18(8		ADDRESS				
CITY-ST-ZIP	S MIAMI FL			1.4 CITY - S	1-21P				
TITLE			DELETE	2.1 1111.6			[Change	Addition
NAME				2.2 NAME			•		
STREET ADDRESS			1	2.3 STREET	ADDRESS				
CITY-ST-ZIP				2.4 CITY - S	S1 - ZIP .				
TITLE			DELETE	3.1 TITLE			Ł	Change	Addition
NAME			İ	3.2 NAME					
STREET ADDRESS				3.3 STREET					
CITY-ST-ZIP			DELLAC	3.4. CITY-5	ST-7IP		т	7 Channe	Addition
TITLE		LJ	DELETE	4.1 TITLE			ι	Change	Addition
NAME				4. 2 NAME					
STREET ADDRESS				4 3 STREET					
CITY-ST-ZIP			DELETE	4.4 City - S	1-7)P		_	Change	Addition
TITLE		1_1	DELETE	51 TITLE	ŀ		ι	virange	TT UMBOOL
NAME				5.2 NAME	IDDOCCO.				
STREET ADDRESS				5 3 STREET	i				
CITY-ST-ZIP			DELETE	54 CHY-S 61 THLE	1 - 7IP	The second secon	т	Change	Addition
TITLE		ليها	DELLIE					0.00190	7.00((۱۱۱۱)
NAME				6.2 NAME	ADDRESS				
STREET ADDRESS				6.3 STREET					
CITY-ST-ZIP	y cortifu that the information of	unnlied with this films do	s not qualify for	6.4 CHY-S		ed in Section 119 07(3)(i) Florida Sta	itutes I further	corlify that	tho

The interpretability of the information supplied with this ining does not quality for the exemption stated in Section 118.07(3)(f), ribrida Statutes. I forther certify that 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or of the direction of the corporation of the receiver of trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

46/07