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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

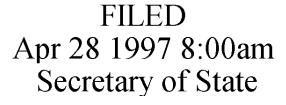
Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # F60882

(0)

STEPHEN M. PAVE, PROFESSIONAL ASSOCIATION





Principal Place	e of Business	Mailing Address			a tetritte rein teist beidt teite imit tidt einer eiter eine eine eine eine eine		
7600 RED RD #200 S. MIAMI FL 33143		7600 RED RD #200 S. Miami FL 33143-5488					
					3. Date incorporated or Qualified 01/05/1982	3a. Date of L 04/19/19	
2. Principal Pi	ace of Business	2a, Mailing Address		• • • • • • • • • • • • • • • • • • • •	4. FEI Number	1	Applied For
21		26			59-1990330		Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.	···········		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State)	City & State			6. Election Campaign Financing	\$5	5.00 May Be
23		28	T - &	***************************************	Trust Fund Contribution	· · · · · · · · · · · · · · · · · · ·	dded to Fees
Zip 24	Country 25	Zip 29	Country 30		8. This corporation has liability for Florida Statutes	ntangible tax un Yes 🔲 No	der s. 199.032,
	g, Name and Address of Cu	urrent Registered Agent			10. Name and Address of New Re	gistered Agent	
	e, stephen M.		81	Name			
7600 RED RD #200 S. MIAMI FL 33143				82 Street Address (P.O. Box Number is Not Acceptable)			
<u> </u>	,		83			· · · · · · · · · · · · · · · · · · ·	·
			84	City		, 85 mg	Zip Code
							
 11. Pursuant t office or re 	to the provisions of Sections 607 epistered agent, or both, in the 5	7.0502 and 607.1508, Florida Statut State of Florida, Such change was :	tes, the above-r	named cor	poration submits this statement for the partion's board of directors. I hereby accept	urpose of chang	jing its registered
agent. I ar	m lamiliar with, and accept the c	obligations of, Section 607.0505, Fl	orida Statutes.	10 00.po.u	ment beard of an estero. The dot accept	ти орронин	in ac regioner
SIGNATURE							
	Signaring lighted or profited name of registers			s-gnature requ	ired when reinstating)	DATE	
12.	DP OFFICERS	AND DIRECTORS DELETE	13.	····	ADDITIONS/CHANGES TO OFFIC		·····
TITLE	PAVE, STEPHEN M	D DECEIE	1,1 TITLE			L_J Ch	lange
NAME	11423 SW 112 ST		1.2 NAME				
STREET ADDRESS	MIAMI FL		1.3 STREET AD				•
CITY - ST - ZIF	MINNI FL	DELETE	1.4 CITY-ST	ZIP		T Ch	nnna I Addition
TITLE		C DECEIE	2.1 TITLE	·	1		ange
NAME:			2.2 NAME				
STREET ADDRESS			2.3 STREET AD				
CITY - ST - 7IP	·····	DELETE	2. 4 CITY-ST-	ZIP		. L Ch	Additional
THLE		L"] percie	3.1 TITLE				ange [] Addition
NAME:			3.2 NAME				
STREEL ADDRESS			3.3 STREET AD				
Cify · S1 · ZiP	· · · · · · · · · · · · · · · · · · ·	Librate	3.4. CITY-ST-	ZIP			I Addition
TITLE		☐ DELETE	4.1 TITLE			L) Ch	ange
NAME Object abposed			4. 2 NAME			•	
STREET ADDRESS			4.3 STREET AD				
CHTY - ST - ZIP		☐ DELETE	4.4 CITY-ST	ZIP .		T AL	anno I dellife-
TITLE		רין הנינונ	5.1 TITLE			, LJ UN	ange L. Addition
NAME OURLA AGRESIA			5.2 NAME	nanena			
STREET ADDRESS			5.3 STREET AD				
CHY-SI-7IP		DELETE	5.4 CITY-ST-:	(IP		L Vr	ange Addition
Title			6.1 TATLE		-	UI	ange E.J Muulkuli
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREET AD				
City-St-ZiP	us could, that the information of	aplied with this files does and a self-	6.4 CITY-ST		d in Continu 110 07/03/01 Figure City	. I foutbook a seed	. Mad the
					d in Section 119.07(3)(i), Florida Statute: t my signature shall have the same lega		

4. I do nereby 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 amual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of tipe proporation or the delevier 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 or an attachment with an address.

SIGNATURE

GY ON THE STERBEN MIR PAVI

4/21/97

(305)661-1984