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

**PROFIT CORPORATION ANNUAL REPORT** 

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # F9600000957 (8)

Principal Plac	as Tina Centre, 201 n. Walnut St	Mailing Address REGINA CEPHAS	Mailing Address  REGINA CEPHAS THREE CHRISTINA CENTRE, 201 N. WALNUT ST				
WILMINGS ON C	JE 18801	HILMINGTON DE 13001				3. Date incorporated or Qualified 3a, Date of Last Report 02/26/1996	
	lace of Business	2a. Mailing Address		****		4. FEI Number Applied For	
21		26				<b>65-0627069</b> Not Applica	
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Additional	
22 City & State		City & State		_		Fee Required	
23	6	28				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution  Added to Fees	
Zip	Country	Zip	Cou	ntry	<del></del>	This corporation has flability for intangible tax under s. 199.032	
24	25	29	30	,		Florida Statutes Yes X No	
	9. Name and Address of Curre					10. Name and Address of New Registered Agent	
BRE	IT, RICHARD H ESQ			81	Name		
311	1 STIRLING RD		}	82	Street Add	dress (P.O. Box Number is Not Acceptable)	
FT (	AUDERDALE FL 33312-6525		[				
				83	J		
			}	84	City	<b>■ 85</b> Zip Code	
						rporation submits this statement for the purpose of changing its register	
office or r	egistered agent, or both, in the State of familiar with, and accept the oblig	e of Florida. Such change wa	as authorized	th.	the corpora	ation's board of directors. I hereby accept the appointment as registere	
	Signature, typod or printed name of registered ag			Αge	ent signature requ	uired when reinstating) DATE	
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	CPSD THE PARTY	☐ DELETE	1.1 111		ļ	Change Add	
NAME	ZUCCARINI, PAUL 1446 SE MCARTHUR BLVD		1.2 NA				
STREET ADDRESS	STUART FL 34996				ADDRESS		
CITY-ST-ZIP TITLE	VCV	DELETE	1.4 CI		ST-ZIP	Change Add	
,	DE LA FUENTE, RICARDO	Detter		2.1 TITLE		Ci cuange T you	
NAME	1446 SE MCARTHUR BLVD		2.2 NA		1000000		
STREET ADDRESS	STUART FL 34996				ADDRESS		
CITY-ST-ZIP TITLE	910/011 1 C 01990	DELETE	2.4 CI 3.1 TIT	•	SI-ZIP	Change Add	
NAME			3 2 NA	•	ŀ	Change Not	
STREET ADORESS					ADDRESS		
CITY-ST-ZIP					S1 - ZIP		
TITLE		DELETE	4.1 TIT		31.7 (1)	Change Add	
NAME			4. 2 N				
STREET ADDRESS					ADDRESS		
CITY-ST-ZIP			4.4 CI		- 1		
TITLE		DELETE	5.1 Til			Change Add	
NAME		·	5.2 NA			_ · ·	
STREET ADDRESS			1		ADDRESS		
CITY-ST-ZIP			5.4 CF				
TITLE		DELETE	6110			☐ Change ☐ Add	
NAME			6.2 NA		[		
STREET ADDRESS					ADDRESS		
CITY-ST-ZIP			6.4 Cm				

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 eath; 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 chapted or in an attachment with an address.

**FILED** 

May 01 1997 8:00am

Secretary of State