		LING FEE /	AFTER MAY 1	IS \$21	25.0	0	 ר					
PROFIT CORPORATION ANNUAL REPORT			FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State									
1996			DIVISION OF CORPORATIONS									
DOCUN		G2366	1 (3)									
1. Corporation	GENERAL	CORP.										
Principal Place	of Business		Maling Address					IO CALING ORIDI FAL			EICH UILH IUEI	
111 NE 1ST ST Suite 600		111 NE 1ST ST Suite 600										
MIAMI FL 33	132		MIAMI FL 33132				3. Date Incorporated or C	Jualified 3	a. Date of L			
2. Principal Pla	e cf Business		2a. Mailing Address				02/11/1983 4. FEt Number		04/2	· · · · ·	pplied For	
21 55 N	I.E. 157	r ST.	26 55 N.E.	<u>(57</u>	51	- ,	59-2394710			N	lot Applicable	e
Suite Apt # 22 Suite			Suite, Apt. #, etc.	1			5. Certificate of Status De	esired			Additional lequired	
City & State	UI FL		City & State	FL			 Election Campaign Fina Trust Fund Contribution 		· ·		May Be to Fees	
24 33(3:	Country Zip				untry	 ⊭	 This corporation has lia Florida Statutes 					
		Address of Current		U			10. Name and Address of			t		
DIX, GAI	RY					ame	ss (P.O. Box Number is Not .	Accostable				
1428 BF	RICKELL AVE				83			Acceptable				
MIAM) F	L 33131									1 -		
	- 4h	(Deal's 007.0500)				ity	•		FL ⁸⁵		Code	
or registere	ed agent, or both,	in the State of Florida	n 607.1508, Florida Statul Such change was authoriz n 607.0505, Florida Statutes	zed by the	corporat	ion's board	tion submits this statement fo I of directors. I hereby accept	t the appoint	e or changin ment as regis	tered	agent. I am	æ
SIGNATURE	Signature, typed or printe	d name of registered agent ar	id the if applicable (N	OTE: Registere	d Agent sigr	nature required s	when reinslating)		DATE			
12.	PD	OFFICERS AND		13.			ADDITIONS/CHANGES	TO OFFICE			RS IN 12	7962
TITLE NAME	MANDELBAUM, ANN				1. 1 TITLE 1.2 NAME				🗋 Ch	ange		34
STREET ADDRESS	871 UNION ST BROOKLYN, NY 00000			1.3 ST								2E034 (12/95)
CHTV - ST - ZIP THTLE	DS		DEL FTE	1.4 Cľ TE 2.1 Ti			····· ··· · · · · · · · · · · ·		Ch	ange	Addition	15
NAME STREET ADDRESS	WEINBERG,	ayne Blvd.		22 N	IAME TREET ADD	DECC						
CHTY-ST-ZIP	MIAMI FL				UTY-ST-Z			-				_
TITUE NAME			DELETE	3.11 3.2 N					[] Ch	ange	Addition	
STREEF ADDRESS		•			STREET ADD	DRESS						
CITY-ST-ZIP TITLE			DELETE	<u>340</u> 4.11	HTY-ST-ZI THTLE	P			Ch	ange	Addition	
NAME				4.2 N								
STHEET ADDRESS CHTY-ST-ZIP					ITREET ADD							
11†LE			DELETE	5.13			** ** · · · · · · · · · · · · · · · · ·	· · · · · · · · · · · · · · · · · · ·	Ch	ange	Addition	
NAME STREET ADDRESS				5.2 N 5.3 S	IAME ITREET ADD	RESS						
CITY - ST- ZIP						P			Ch	20.00	Addition	_
title Name				6 1 1 6 2 N						ange		
STHEE! ADDRESS					TREET ADD							
CITY-ST-ZIP 14. I do hereby cortify that	certify that the in	formation supplied wi	th this filing is voluntarily fur	nished and	does no	t qualify for	r the exemption stated in Sec	tion 119.07(3)(k), Florida (Statute	s. 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 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 on an attachment with an address.												
·	SIGNATUFIE: X 4/22/96 (305) 374-0080											
GIGINAT		MATTHE AND TYPED OR F	RINTED NAME OF BIGNING OFFIC	ER OR DIREC	TOR		Date	- · · · · · · · · · · · · · · · · · · ·	Daytine	Phone #	00	