SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED Sep 08 1997 8:00am Secretary of State

 Corporation 	MENT # G4087 ORY-MAKERS, INC.	5 (8)			81811 81811 81811 81811 81811 81811 81811 81811
Principal Place	e of Business	Mailing Address			DIBIL BIBIT BIBIT BIBIL BIBIT BIBIT 1001
Principal Place of Business Mailing Address 3560 NW 97 TERR. 3560 NW 97 TERR.				·	
CORAL SPRINGS FL 33065 CORAL SPRINGS FL 33065			065		
				DO NOT WRITE	IN THIS SPACE
				3. Date Incorporated or Qualified	3a. Date of Last Report
l				05/24/1983	02/15/1996
	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21				65-0043227	Not Applicable
Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional	
22 City & Ctoty		City & Ctata			Fee Required
City & State	9	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	This corporation owes or has pair	
24	25	29	30	Personal Property Tax due June	
	9. Name and Address of Currel		1901	10. Name and Address of New Rec	
GO	RDON, BERNARD		B1 Name		
SEED NW OTH TEDDACE				drage (D.O. Boy N. where is Not Assessed	
CORAL SPRINGS FL 33065			82 Street Add	dress (P.O. Box Number is Not Acceptable NW 97 TH TERR	
	r		83	111111111111111111111111111111111111111	ASSE
	•				
	•		B4 City		FL 85 Zip Code
11. Pursuant to two 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 am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.					
SIGNATURE	Signature, typed or printed name of registered ag-	ent and title if applicable (NO)	TE: Registered Agent signature reg	pired whon reinslating)	DATE
12.		D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	
TITLE	PD	DELETE	1.1 TITLE		Change Addition
NAME	GORDON, DAVID		1.2 NAME		
STREET ADDRESS	3560 NW 97TH TERRACE		1.3 STREET ADDRESS		
CITY-ST-ZIP	CORAL SPRINGS FL		1.4 CITY - ST - ZIP		
TITLE	VTD	☐ DELETE	2.1 TITLE		Change Addition
NAME	Gordon, Bernard		2.2 NAME		
STREET ADDRESS	3560 NW 97TH TERR		2.3 STREET ADDRESS		
CITY-ST-ZIP	CORAL SPGS. FL		2. 4 CiTY - ST - ZIP		
TITLE	VIII.	☐ DELETE	3.1 TITLE		Change Acidition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME			4. 2 NAME	``	
STREET ADDRESS			4.3 STREET ADDRESS	\$ x	,
CITY-SI-ZIP			4.4 City-St-ZiP	r	
TITLE		DELETE	5.1 TITLE		Change () De Midition
NAME		—	5.2 NAME		- KL & W
STREET ADDRESS			5.3 STREET ADDRESS		, 0/10,
CITY-ST-ZIP			5.4 CITY-S1-ZIP		
TITLE		DELETE	6.1 TITLE		Change Addition
NAME		, 🗀 🗷	6.2 NAME	10000228; -09/09/970104	
STREET ADDRESS			6.3 STREET ADDRESS	09/09/9701049	205g
				***550.00	
CITY-ST-ZIP			6.4 CITY - \$1 - ZIP		

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 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 of Director of the corporation or an attackment with an address.

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Garage 15/67 (854) 200