## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION ANNUAL REPORT

1006



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

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101

Suite, Apt. #, etc.  Suite. Apt. #, etc.  5. Certificate of Status Desired  \$8.75 Additional	FELICE, LTD., INC.  Principal Place of Business Mailing Address  7850 HARDING AVE.  7850 HARDING AVE.						
2. Moding Address    Solid Age   File Number   F	MIAMI DENC	50 FE 33141	MIAMI DENON PE 3311	*1			
Successful   Suite   Application   A	2. Principal P	Pace of Business	2a Mailing Address			<del></del>	
27   20   8 State   27   5. Certification of Statute Desired   Fig. Repopried   Fig. Repopried   20   20   20   30. May 8 or 17   20   30. May 9 or 17   30. This composition has liability for intemplete tax under is 199.003, 40 days to Fig. 8   199.003,	1		<del>-</del>			<b></b>	
Country   28   Stude   Country   28   Trust Fand Continuation   S.5,00 May be Added to Fees	Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5 Certificate of Status Desired	\$8.75 Additional	
26   26   27   26   27   27   28   29   29   29   29   29   29   29	2					Fee Required	
2 County 2 County 2 County 2 County 2 County 8 This corporation has liability for intengible tax unders 199.032, 100. Name and Address of Current Registered Agent 100. Name and Address of New Registered Age		10					
S   29   30   Florida Statutes   10   Normal and Address of Current Registered Agent   10. Name and Address of New Registered Agent   10. Name and Address of Name and	1 .	Country	-···-	Country		A0060 to F665	
NICHOLS, ANNE C. 450 PARADISE ISLE BLVE., #207 HALLANDALE FL 33009  84 Orly FL 85 Zo Code Fr. Provision to the provisions of Sections 607/0502 and 607/1508. Florida Statutes, the above named corporation submits the statement for the purpose of changing as registered office or registered agricult, or John, in the State of Parada. Submit change was authorized by the corporation's board of directors. I hereby accept the appointment as registered office or registered agricult, or John, in the State of Parada. Submit change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agricult. I am SONATURE.  SONATURE.  SONATURE.  JOTICERS AND DIRECTORS IN 12.  OFFICERS AND DIRECTORS IN 12.  DST OFFICERS AND DIRECTORS IN 12.  NOTE Parameter Agriculture	11	From 1	<u>├</u> ──¬ '	h			
NICHOLS, ANNE C. 450 PARADISE ISLE BLVE. \$207 HALLANDALE FL 33009  11. Fursion to the provisions of Sections 077/00/2 and 607 1506; Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office statement and provisions with and accept the obligations of Sections 077/00/2 and 607 1506; Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office statement and provisions with and accept the obligations of Sections 100 100 100 100 100 100 100 100 100 10		g, Name and Address of Cur	rent Registered Agent		10. Name and Address of New F	legistered Agent	
## Ory ## Description of Sections 607 0007 and 607 1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered officing or repailered agent, or both, in the State of Florida. Statutes, the above named corporation submits this statement for the purpose of changing its registered officing or repailered				81 Name			
HALLANDALE FL 33009    B				82 Street Add	ress (P.O. Box Number is Not Acceptab	ole)	
11. Fursion to the provisions of Sections 607 (0502 and 607 1508. Florida Statutes, the above-named corporation submits this alatement for the purpose of changing at registered office or registered operal, 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 office or registered operal, 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 office or requirement of the purpose of changing as registered office or requirement of the purpose of changing as a supplied of the corporation's board of directors. I hereby accept the appointment as registered office or requirement of the purpose of changing as a supplied of the corporation's board of directors. I hereby accept the appointment as registered office or requirement of the purpose of changing as a supplied of the corporation's board of directors. I hereby accept the appointment as registered office or requirement as registered office or requirement as registered office.  2. OFF.CFRS AND DIRECTORS 10.12  DST  NICHOLS, ANNE C  15. TITLE  15. TITLE  16. DATE  17. NICHOLS, ANNE C  16. TITLE  16. DATE  17. NICHOLS, ANNE C  16. TITLE  16. DATE  17. SAME				02			
1. Pursus It in the 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, in the State of Secide. Such change was submitted by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the objection 607,0505, for joined statutes.  SCNATURE  2. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  THE DIST   DRIFT   1.1 THE   1.2 NAME   1.2 NAME   1.3 SIRECT ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  PRINCHOLS, ANNE C   1.3 SIRECT ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  THE DIST   DRIFT   1.3 SIRECT ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  THE DIST   DRIFT   1.4 CHANGES	MALLAN	NUALE FL 33009		63			
contribution of Lobbit in the State of Fericles. Such change was sulhorized by the corporation's board of directors. I hereby accept the appointment as registered agent, I am familier with and accept the objection 60.0 Sciols, Friends Statutes.  SCNATURE  2. OFFICERS AND DIRECTORS. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  INCHOLS, ANNE C  7850 HARDING AVE  13 STREET ADDRESS  MIAMI BEACH FL  DP  GRAZIANO, THOMAS  45 OPARADISE ISLE BLVD #207  HALLANDALE FL  DP  GRAZIANO, LUCILLE  45 THE ADDRESS  44 CHY-51-2P  DELETE  47 THE  GRAZIANO, LUCILLE  45 SPAME  45 SPARADISE ISLE BLVD #202  HALLANDALE FL  DELETE  5 THE  GRAZIANO, LUCILLE  45 THE ADDRESS  44 CHY-51-2P  DELETE  5 THE  GRAZIANO ADDRESS IN TELETIONESS  HALLANDALE FL  DELETE  5 THE  GRAZIANO ADDRESS  44 CHY-51-2P  DELETE  5 THE  GRAZIANO ADDRESS  45 CHY-51-2P  DELETE  5 THE  GRAZIANO ADDRESS				84 City		85 Zip Code	
7850 HARDING AVE MIMI BEACH FL  GRAZIANO, THOMAS  450 PARADISE ISLE BLVD #207  HALLANDALE FL  DCHETE  GRAZIANO, LUCILLE  32 NAME  455 PARADISE ISLE BLVD #202  HALLANDALE FL  DELETE  DELETE  4 1 TITLE  Change Addition	12.	OFFICERS.	AND DIRECTORS	13.	<u>_</u>	ICERS AND DIRECTORS IN 12	
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62 NAME 63 STREET ADDRESS 64 CHY-S1-ZIP 4. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 casts, 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	14-51-701			5.4 CHTY - ST - ZIP			
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6 4 City S1-2P  4. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 cath; 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							
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appears in Block 12 or Block 13 if changed, or on an attachment with an address.	<ul> <li>certify that</li> </ul>	at the information indicated on this a	innual report or supplemental ann	rual report is true and accura	ate and that my signature shall have the	same legal effect as if made under	
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SIGNATURE:///W.L. (* . //WWW) Jan. 15. 1966 305 861-3365	JIGHA		D OR PRINTED NAME OF SIGNING OFFICE	FR OR DIRECTOR	Jan. 23, 1966	Dayfore Prove t	