## 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 # G91623

(0)

## **FILED** Apr 11 1997 8:00am Secretary of State

Principal Pro	Ce of Business  JOALL DR. #221 78	Mailing Address 10851 N. KENDALL DR. #2 MIAMI FL 33178-1552	21			H 1444 (1444 (1444 (1444 (1444 (1444 (1444 (1444 (1444 (1444 (1444 (1444 (1444 (1444 (1444 (1444 (1444 (1444 (	
					3. Date Incorporated or Qualified 03/16/1984	3a. Date of Last Report 02/26/1996	
h	Place of Business	2a. Mailing Address			4. FEI Number	Applied Fo	۰r
21		Suite, Apt. #, etc.			59-2411193	Not Applica	
Suite, Apt	#, euc.	27			8. Certificate of Status Desired	\$8.75 Additiona	* }
City & Sta	lle.	City & State	<del></del>		6. Election Campaign Financing	\$5.00 May Be	
23	Comple	28	Country	<del></del>	Trust Fund Contribution	Added to Fees	
Zip   <b>24</b>	Country 25	Zip 29	Country 30	<i>y</i>	This corporation has liability for Florida Statutes	rintangible tax under s. 199.032 ☑ Yes  ☑ No	2, }
[24]	g, Name and Address of Current		301		10. Name and Address of New R		
BA	rrett, R. W.	·	81	Name			
	851 N KENDALL DR #221		82	Street Add	Iress (P.O. Box Number is Not Accepta	ble)	
MU	AMI FL 33176			<u> </u>			
			83	1			}
ĺ			84	City		FL 85 Zip Code	
11 Pursuan	to the provisions of Sections 607 0502	and 607 1508. Florida Statute	s the abov	a-named cor	poration submits this statement for the		ored
office or	t to the provisions of Sections 607.0502 registered agent, or both, in the State o am familiar with, and accept the obligati	f Florida. Such change was a	uthorized b	y the corpora	ition's board of directors. I hereby acce	pt the appointment as registere	90
SIGNATURE	and talknish with and ascept the congain	10/15 01, 000/10/1 007:0000, 1 10	iga olalule	a.			ŀ
SIGNATURE	Signature, typical or position harve of registered agent	and title if applicable (NOTE	Registered Ag	ent signature requ	ired when reinstating)	DATE	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFI		
TITLE	PD PADOCTY IS NO	☐ DELETE	1.1 TITLE			∐ Change ∐ Ado	lition
Î NAME }	BARRETT, R. W. 10651 N KENDALL DR #221		1.2 NAME				}
STREET ANDRESS	S. MIAMI FL			T ADDRESS			- 1
CHY-ST ZIP	VSD	DELETE	1.4 CITY - 2 1 TITLE	SI-ZIP		Change Add	dition
NAME	PAUL, STEVEN F.	Feed process	2.2 NAME			the country of the	}
STEEF LADDRESS	JAARS SELECTIONELL DO HANGE		1	T ADDRESS			)
Crity - ST - ZIP	S. MIAMI FL		2. 4 CITY-	· · · · · · · · · · · · · · · · · · ·			Ì
TITLE	VTD	DELETE	3 1 TITLE			Change Ado	dition
NAME	SCHULTE, JAMES E.		3.2 NAME	ļ			- [
STREET ADDRESS			3.3 STREE	T ADDRESS			ĺ
CHY-ST-7IP	S. MIAMI FL	Florier	3.4 CITY-	ST-ZIP			#35a=
THE	VD Smith, Peter D.	D DELETE	4 1 TITLE			Change Add	ן מסווינב
NAME Conservations	ANACA MENTANDALI DIO ANNA		4. 2 NAME	4			ł
STREET ADORESS DITY-ST-ZIP	S. MIAMI FL		4.3 STREE 4.4 CHTY-	F ADDRESS			1
TILLE	A. treed hates t pp	DELETE	5.1 TITLE	31-11		☐ Change ☐ Add	dition
NAME			5.2 NAME				1
\$TREET ADDRESS			1	T ADDRESS			1
C/TY+ST-ZIP			5.4 CITY-	1			]
TITLE		☐ DELETE	61 TITLE			Change Add	noitit
NAME:			6.2 NAME				ļ
STREET ADDRESS			6.3 STREE	T ADDRESS			- (
DiTY - ST - 7IP	J	IN ALL COLUMN	6.4 CITY-		ed in Section 119.07(3)(i). Florida Statut	an 15 what maybe tall at the	

rius nineary certay martine information supplied with this ming does not qualify for the exemption stated in Section 119.07(3)(f). Florida Statutes. I further certify that the information indicated on this annual report or supplied 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 12 if changed, or on an attachment with an address.

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