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

PROFIT CORPORATION **ANNUAL REPORT** 1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # G99589

(5)

Mailing Address

DEMORA ENTERPRISES, INC.

FILED Apr 29 1997 8:00am Secretary of State



MIAMI FL 33155					MIAMI FL 33155-5416									
					f					3. Date Incorporated or Qualified 03/13/1984	3a. Date 07/08	of Last R 3/1996	leport]
2. Principal Place of Business					2a. Mailing Address					4. FEI Number		Ar	plied For	1
21					26					59-2423492		No	t Applicable]
Suite, Apt. #, etc.					Suite, Apt. #, etc.					5. Certificate of Status Desired	\Box	\$8.75		Ì
22				27		J						Fee Re		1
City & State	Э				City & State					6. Election Campaign Financing		\$5.00		l
Zip Country								Country		Trust Fund Contribution				
24		25	Codinity	26	٦ .	30				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No				
9, Name and Address of Curren										10. Name and Address of New Registered Agent				
RUB	IO, DELIA							81	Namo			· · · · · · · · · · · · · · · · · · ·		1
8465 S.W. 48TH STREET								82	Strool A	ddress (P.O. Box Number is Not Acceptab		<u></u>		ł
MIAMI FL 33155									GIICCI A	doress (F.O. Box Number is Not Acceptab	16)			
								83						1
								84	City			85 Zip	Code	1
									,		FL			
11. Pursuant i office or re agent. I a	lo the provis egistered ag m familiar wi	ions ient, ith, a	of Sections 607,050; or both, in the State nd accept the obliga	2 and of Flo ations	l 607.1508, Flori orida. Such char of, Section 607	da Statuto ige was au .0505, Flor	s, the al uthorized rida Stat	oove d by utes	e-riamed c the corpo	orporation submits this statement for the p oration's board of directors. I hereby accep	urpose of o I the appoi	hanging it ntment as	ls registered registered	
SIGNATURE	Signature, typed	or pri	ned name of registered age	n! and I	tile il Application	TCON)	Registered	a Agn	nt signalure re	equired when reinstating)	DATE			Ì
12.			OFFICERS AND) DIR			13.			ADDITIONS/CHANGES TO OFFIC];
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NAME							62 N/	AME						
STREET ADDRESS							6351	REET	ADDRESS					
CITY-ST-ZIP							6.4 (4	1Y - S	T-ZIP					

Too 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 or Block 13 if changed, or on an attachment with an address.

GNATURE:

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