FILE	NOW: FILING FEE	AFTER MAY 1 I	S \$ 2		00					
F	PROFIT PORATION	FLORIDA DEPA	ARTMENT	Ĭ	JATE					
	JAL REPORT		B. Mortha tary of Star							
•	1996	DIVISION OF	CORPOR	10	NS					
DOCUN 1. Corporation	MENT # H079	30 (1)								
	ORATE GENERAL #8, INC) .								
			:							
Principal Place	of Business	Mailing Address					H al ii dib ii d		 	
4224 HOLLYWOOD BLVD. HOLLYWOOD FL 33020			4224 HOLLYWOOD BLYD. HOLLYWOOD FL 33020							
						3. Date Incorporated or Qualified 06/14/1984		of Last Re)6/12/19		
2. Principal Pla 21	ace of Business	2a. Mailing Address 26				4. FEI Number 59-2440686			pplied For lot Applicable	
Suite, Apt. #	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75	Additional Required	
City & State		City & State				6. Election Campaign Financing		\$5.00	May Be	1
Z ip	Country	28 Zip	Cou	htry		Trust Fund Contribution 8. This corporation has liability for			to Fees 199.032,	\dashv
24	25 9. Name and Address of Curre	29	30	[™ No	<u> </u>	.,	_
	9. Name and Address of Curre	int negistered Agent		B1	Name	10. Name and Address of New F	egistereo	Agent		\dashv
	GUEZ, PEDRO			82	Street Addre	ss (P.O Box Number is Not Acceptab	le)			-
	illmore St. Wood Fl 33019			83						4
, , , ,										_
				84	City		FL		Code	_
or registere	ed agent, or both, in the State of Flo	rida. Such change was authorize	ed by the c	ve-na corpo	amed corpora ration's board	ition submits this statement for the puri d of directors. I hereby accept the app	pose of cha pintment as	inging its re registered	egistered office agent. I am	е
l familiar witi SIGNATURE	h, and accept the obligations of, Sec	ction 607.0505, Florida Statutes								
	Signature, typed or printed name of registered age	nt and title if applicable. (NO ND DIRECTORS		Agent	signature required		DATÉ	DISTOTO		_ §
12.	PD OFFICERS AF	DELETE	13. 1.11	TLE		ADDITIONS/CHANGES TO OFF		Change	Addition	42
NAME	MYERS, MILTON B.		1.2 N/							2E034 (12/95)
STREET ADDRESS	2514 HOLLYWOOD BLVD. HOLLYWOOD FL 33020				ADDRESS					띪
CITY~\$T-ZIP TITLE	VST	☐ DELETE	2 1 T)	TY-ST TLE	- <i>I</i> P			Change	Addition	⊣წ
NAME	RODRIGUEZ, PEDRO L.		2 2 NA	ME						1
STREET ADDRESS	1244 FILLMORE ST. Hollywood Fl 33019				ADDRESS					
CITY-ST-ZIP TITLE	710001110007100010	DELETE	2 4 Cli 3 1 Ti		-ZP		[Change	Addition	\dashv
NAME			3 2 NA	ME						
STREET ADDRESS			l i		ADDRESS					
CITY-S1-ZIP TITLE		☐ DELETE	3.4 CT 4. 1 TI		- ZIP			Change	Addition	\dashv
NAME			. 4.2 NA	ME			_			
STHEET ADDRESS					ADDRESS					
CHTY-ST-ZIP TITLE		DELETE	4.4 CF 5 1 Ti	TY-ST TLE	- ZIP			Change	Addition	-
NAME.			5.2 NA	ME			_		_	
STREET ADDRESS					ADDRESS					
CHY-ST-ZIP THUE		DELETE	5.4 CIT		- ZIP		Г	Change	Addition	\dashv
NAME			6.2 NA				-			
STREET ADDRESS					ADDRESS					
CHY-SI-ZIP 14. I do hereby	certify that the information supplied	with this filing is voluntarily furni	6.4 CII ished and i	does	not qualify fo	r the exemption stated in Section 119.	07(3)(k). Flo	rida Statute	es. I further	4
certify that oath; that I	the Information indicated on this and am an officer or director of the corp	hual report or supplemental annuloration or the receiver or trustee	ual report is e empower	s true	and accurate	e and that my signature shall have the report as required by Chapter 607, Fig.	same legal	effect as if	made under	
appears in	Block 12 or Block 13 if changed, or	on an attachment with an addre	ess.							
SIGNATURE: Who have the signing officer or director (10/94 305-946-360) SIGNATURE: Cale Disylinis Proces of Control C										
	SIGNATURE AND TYPED O	PRINTED NAME OF SIGNING OFFICE	OR DIRECT	OR		Date	D	aytime Phone #		