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 # H17856

(6)

Mailing Address

742-744 SOUTHWEST EIGHTH STREET CORPORATION

2. Principal Place of Business 2. Mailing Address 3. FEI Number 59-2429185 Surte, Apt. #, etc. 2. Surte, Apt. #, etc. 2. City & State 2. City & State 3. City & State 3. Country 3. Country 4. Find Contribution Address of May Be Added to Fees 4. This corporation has liability for intangible tax under s. 199.032, 4. Fiorida Statutes Yes No 9. Name and Address of Current Registered Agent 4. This, JACK P. 6. Election Campaign Financing Trust Fund Contribution Added to Fees 4. This corporation has liability for intangible tax under s. 199.032, 4. Florida Statutes Yes No 9. Name and Address of Current Registered Agent 4. ATTIAS, JACK P. 6. Election Campaign Financing Trust Fund Contribution Address of New Registered Agent 4. This corporation has liability for intangible tax under s. 199.032, 4. Florida Statutes No 9. Name and Address of New Registered Agent 4. ATTIAS, JACK P. 6. Election Campaign Financing Trust Fund Contribution 4. This corporation has liability for intangible tax under s. 199.032, 4. Florida Statutes No 9. Name and Address of New Registered Agent 4. This corporation has liability for intangible tax under s. 199.032, 4. Florida Statutes No 9. Name and Address of New Registered Agent 4. This corporation has liability for intangible tax under s. 199.032, 4. Florida Statutes No 9. Name and Address of New Registered Agent 4. This corporation has liability for intangible tax under s. 199.032, 4. Florida Statutes No 9. Name and Address of New Registered Agent 4. This corporation has liability for intangible tax under s. 199.032, 4. Florida Statutes No 8. This corporation has liability for intangible tax under s. 199.032, 4. Florida Statutes No 9. Name and Address of New Registered Agent 4. Florida Statutes No 9. Name and Address of New Registered Agent 4. Florida Statutes No 9. Name and Address of New Registered Agent 4. Florida Statutes No 9. Name and Address of New Registered	800 Grapetree Dr. #4E-North Key Biscayne Fl 33149			600 GRAPETREE DR. #4E-NORTH KEY BISCAYNE FL 33149-2754				Date Incorporated or Qualified	Se Date	of Last F	Perort	
25 Sute, Apt. #, etc Sute, Apt. #, etc City & State City & State City & State Country Zip Country B. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Florida Statutes No Name and Address of New Registered Agent ATTIAS, JACK P. 800 GRAPETREE DR. #4E-NORTH KEY BISCAYNE FL 33149 82 Street Address (P.O. Box Number is Not Acceptable) FL 85 Zip Code 11. Pursuant to 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.									07/23/	1996	Юрон	
Suite, Apt. #, etc Suite, Apt. #, etc City & State City & State City & State 28 Country Zip Country 29 Name and Address of Current Registered Agent ATTIAS, JACK P. 800 GRAPETREE DR. #4E-NORTH KEY BISCAYNE FL 33149 Suite, Apt. #, etc. Suite Address of Status Desired Fee Required Suite Address of Campaign Financing Trust Fund Contribution Added to Fees No 10. Name and Address of New Registered Agent ATTIAS, JACK P. Suite Address (P.O. Box Number is Not Acceptable) Suite Address of New Registered Agent Attias, Jack P. Suite Address (P.O. Box Number is Not Acceptable) Suite Address of New Registered Agent Attias, Jack P. Suite Address (P.O. Box Number is Not Acceptable) FL 85 Zip Code Titl. Pursuant to 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.	· 			h			i			 		
City & State 23 City & State 28 City & State 28 Trust Fund Contribution Trust Fund Contribution Added to Fees Added to Fees At This corporation has liability for intangible tax under s. 199.032, Florida Statutes 9. Name and Address of Current Registered Agent ATTIAS, JACK P. 600 GRAPETREE DR. #4E-NORTH KEY BISCAYNE FL 33149 81 Registered Agent 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code 11. Pursuant to 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.	Suite, Apt. #, etc							5. Certificate of Status Desired	5. Certificate of Status Desired \$8.75 Additional			
28							******************	6. Election Campaign Financing		\$5.00	May Be	
25 29 30 Florida Statutes										Added	to Fees	
9. Name and Address of Current Registered Agent ATTIAS, JACK P. 600 GRAPETREE DR. 44E-NORTH KEY BISCAYNE FL 33149 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code 11. Pursuant to 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.	 1	<u>├</u> ─┐	· -		<u>├</u> ─┐ '			the state of the s				
600 GRAPETREE DR. #4E-NORTH KEY BISCAYNE FL 33149 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code 11. Pursuant to 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.	24	and the second s			[30]	T	 					
#4E-NORTH KEY BISCAYNE FL 33149 83 84 City FL 85 Zip Code 11. Pursuant to 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.	ATTI/	AS, JACK P.				81	Name		 			
#4E-NORTH KEY BISCAYNE FL 33149 83 84 City FL 85 Zip Code 11. Pursuant to 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.						82	Street A	iddress (P.O. Box Number is Not Acceptate	la)			
84 City FL 85 Zip Code 11. Pursuant to 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.								idaloss (i .o. dox Hallissi is Hat Hoodplate				
11. Pursuant to 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	KEY	BISCAYNE FL 331	49			83						
11. Pursuant to 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						84	City		FL	5 Zip	Code	
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.	affice or re	egistered agent, or bo	ith in the State of F	Florida. Such change wa	as authoriz	zed by	the corp	corporation submits this statement for the p oration's board of directors. I hereby accep	urpose of ch t the appoint	anging i	ts registered registered	
SIGNATURE Signator imposite interesting of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE		Signature invocation printed ha	no of rea stered agent an	o title if applicable (f	NOTE: Begiste	ered Ane	at sionature r	required when reinstating)	DATE			
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				· · · · · · · · · · · · · · · · · · ·			il signature i			RECTO	RS IN 12	
TITLE PVD DELETE 1.1 TITLE	TITLE			DELETE	1.1	TITLE					Addition	
NAME ATTIAS, JACK P. 1.2 NAME	NAME				1.2	2 NAME						
STREET ADDRESS 600 GRAPETREE DR. #4E-N 1.3 STREET ADDRESS	STREET ADDRESS				1.3	STREET	ADORESS					
CITY-ST-ZIP KEY BISCAYNE FL 1.4 CITY-ST-ZIP	••••	KEY BISCAYNE F	<u>L</u>				T-ZIP					
PELEONA MILITARIO	1	S ECIECIA MIIDTAI	^	LJ DELETE					L	Change	Addition	
AND PROFESSION	į											
VEVDICOAVAIT EL	1											
STATE OF THE PROPERTY OF THE P		TE I DIOUNTITE T	*	DELETE			I-ZIP			Change	Addition	
NAME 32 NAME	1			Land Brack 1						orango	Land Address.	
STREET ADDRESS 3.3 STREET ADDRESS	ŧ						ADORESS					
CITY-ST-ZIP 34 CITY-ST-ZIP	ì					-						
				DELETE						Change	Addition	
NAME 4.2 NAME	NAME				4. 2	2 NAME						
STREET ADDRESS 4.3 STREET ADDRESS	STREET ADDRESS				4.3	STREET	ADDRESS					
CITY-ST-ZIP 4.4 CITY-ST-ZIP	CITY - ST - ZIP				4.4	CITY-ST	T-ZIP					
TITLE DELETE 5.1 TITLE	TITLE			☐ DELETE	5.1	TITLE				Change	☐ Addition	
NAME 5.2 NAME	NAME				5.2	NAME						
STREET ADDRESS 53 STREET ADDRESS	STREET ADDRESS				5 3	STREET	ADDRESS					
CPY-S1-70P 5.4 CPY-S1-71P							T-ZIP					
				[] DELETE					اسا	Change	Addition Addition	
NAME 6.2 NAME												
STREEL ADDRESS 6.3 STREET ADDRESS												
CITY-ST-ZIP 64 CITY-ST-ZIP 64 CITY-ST-ZIP 64 CITY-ST-ZIP 14. I do hereby cert.ly 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		w carl fu that the infer	resting supplied wi	th this films does not a				ated in Section 110 07/2V/). Florida Clatida	- Luthor	etifi, short	tho	
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; the lam an officer or director of the corporation or the receiver or justifier empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name	information	n indicated on this an	riual report or supp	plemental annual report	is true and	d accu	rate and	that my signature shall have the same legs	effect as if	nade un	der oath; that	

SIGNATURE:

appears in Block 12 or Block

MATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-24 - 97

Daylitre Ploke #

FILED

Jan 29 1997 8:00am

Secretary of State