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

PROFIT CORPORATION ANNUAL REPORT

1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

FILED

Apr 02 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # H23661

(2)

TRAUNE		, ,					
Principal Place % JOHN RENU 1026 HARDEE I CORAL GABLES	ART RD	Mailing Address % JOHN RENUART 1026 HARDEE RD CORAL GABLES FL 3	% JOHN RENUART			3. Date Incorporated or Qualified 3a. Date of Last Report	
						10/02/1984 02/12/1996	
2. Principal Place of Business		2a. Mailing Address	2a. Mailing Address			4. FEI Number Applied For	
21 Suite, Apt. #, etc.		26 Suite Ant # etc	Suite, Apt. #, etc.			59-2474912 Not Applicable \$8.75 Additional	
22	τ, ι	h	27			5. Certificate of Status Desired Fee Required	
City & State	;	City & State		•		6. Election Campaign Financing \$5.00 May Be	
23		28			Trust Fund Contribution Added to Fees		
Zιρ	Country	Zip	 1	Country		R. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	
24	25 S. Name and Address of Curre	29 ent Registered Agent	30			0. Name and Address of New Registered Agent	
RFN	UART, JOHN			81	Name		
	HARDEE RD			82	Street Addres	ss (P.O. Box Number is Not Acceptable)	
COR	AL GABLES FL 33146				00000	1. O. Box Nambol of National Supplement	
				83			
				В4	City	FL 85 Zip Code	
11 Pursuant t	o the provisions of Sections 607.05	502 and 607 1508. Florida S	tatutes the al	hove	-named corpo	· · · · · · · · · · · · · · · · · · ·	
office or re	egistered agent, or both, in the Star	te of Florida. Such change v	vas authorized	d by	the corporatio	ration submits this statement for the purpose of changing its registered in a board of directors. I hereby accept the appointment as registered	
SIGNATURE	Siti	10.40	<i>I</i> .	0.00	•		
SIGNATORIC	Signature, typed or portudican is a régistered a	igerit avid title (Vapplicable).	(NOTE: Aegistered	d Ager	n signature required		
12.	"OFFICERS A	ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TILLE	renuart, John R.	☐ DELETE				Change Addition	
NAME STREET ADDRESS	4000 HADDEE DD			1.2 NAME 1.3 STREET ADDRESS			
CITY-S1-ZIP	CORAL GABLES FL		•	TY - \$1	· · · · · · · · · · · · · · · · · · ·		
TIFLE		☐ DELETE				Change Addition	
NAME			2.2 N/	AME			
STREET ADDRESS			2.3 \$1	TREET.	ADDRESS		
CHY-ST-ZIP	- 110 111 111 111 111 111 111 111 111 11	T belev	2 4 0		T-ZiP		
Title		☐ DELETE				Change Addition	
NAME CARLLY ADOLDED			3.2 N/		ADDRESS		
STREET ADDRESS CITY-SY ZIP				ITY-S			
JIITE		DELETE			1 #11	Change Addition	
NAME			4. 2 N	IAME			
STREET ADDRESS			4.3 \$1	REET	adoress	į.	
CITY-S1-ZIP				ITY- \$1	r- ZIP		
TILLE		DELETE	1			Change L Addition	
MMT.			5.2 N/				
STREET ADOPÉSS			1		ADDRESS		
CITY-S1-ZIP TITLE		DELETE		TY-SI	1-20	Change Addition	
NAME			62 N				
STREET ADDRESS					address		
CITY-SI-ZIP			1	ITY - ST	· · · · · · · · · · · · · · · · · · ·		
informatio	in indicated on this annual report of	r supplemental annual repor	ri is true and a	accu	rate and that r	in Section 119.07(3)(i), Florida Statutes. I further certify that the ny signature shall have the same legal effect as if made under oath; that	
	flicer or director of the corporation in Block 12 or Block 13 if changed,			exec	ute this report	as required by Chapter 607, Florida Statutes; and that my name	