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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # H72088

(8)

MARTIN E. KATZ ENTERPRISES, INC.

FILED
May 09 1997 8:00am
Secretary of State

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Principal Place	of Business	Mailing Address			E IBBIRK BILL JOHN KAN SAMI JAIAL JAIL	U FULL W)#11 ULULL 1	1811 B181 W	ibit indi
% SUZAN K. IA 6701 S.W. 1461 MIAMI FL 3315	TH ST.	% SUZAN K. IMBER 8701 S.W. 146TH ST. MIAMI FL 33158-1721						
MINIMI (F 0010	·	NIW WA - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 -			3. Date Incorporated or Qualified 08/19/1985	3a. Date o 05/09/		port
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number		App	olied For
21		26			59-2564496		4	Applicable
Suite, Apt	#, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired	□ \$	8.75 A Fee Red	
City & State	3	City & State			6. Election Campaign Financing		5.00	May Be
23]		28			Trust Fund Contribution		Added to	•
Zip	Country	Zip	Countr	y	8. This corporation has liability for it	ntangible tax	ungler s.	199.032,
24	25	29	30		Florida Statutes	Yes DA	<u> </u>	
	9. Name and Address of Curr	ent Registered Agent		4	10. Name and Address of New Re	gistered Age	nt	
IMBI	er, suzan K.		81	Name.				
6701	1 S.W. 146TH ST.		83	Street Ad	dress (P.O. Box Number is Not Acceptab	le)	,	
MIAI	MI FL 33158		8:	3				
				<u> </u>				
			B4	City		FL 8	5 Zip C	Code
SIGNATURE		ser President			ration's board of directors. I hereby acception and acception when rehistating)	25-97 DATE		
12.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC			
TILE	PD	DELETE	1,1 TITLE	F	'	\mathbf{Z}	Change	Addition
NAME	IMBER, SUZAN K.		1,2 NAME	. I	MBOR, SUZAN K. 5025 COLLIDS AUR., #1	0 - cm	Adde	245
STREET ADDRESS	6701 S.W. 146TH ST.		1.3 STRE	T ADDRESS 5	SOZS 'COLLIAS AUR", #1	807		
CITY - ST - 7IP	MIAMI FL		1.4 CITY	ST-ZIP 7	MIAM' BEACH FLA. !	3314-0		
TITLE	D	DELETE	2.1 TITLE	•	•	· al	Change	Addition
NAMÉ	IMBER, BARRY A.		2 2 NAMI		MBIR BARRY A.	0.	f AND	26-55
STREET ADDRESS	6701 S.W. 146TH ST.		2.3 STRE	T ADDRESS	DES COLLINS AUR, #1	807		
C(1) - S1 - ZIP	MIAMI FL		2. 4 CITY	-ST-ZIP	MIAMI BEACH, FLA. 3	33140		
1616	1107 1711 1 12	DELETE	3.1 TITLE				Change	Addition
NAME			3.2 NAMI					
STREET ADORESS			3.3 STRE	ET ADDRESS				
City - St - ZiF			3.4. CITY	- \$1'- ZIP				
DILE		☐ DELETE	4.1 TITLE				Change	Addition
NAME			4. 2 NAM	E				
STREET ADDRESS			4.3 STRE	ET ADDRESS				
CHY-SI Zir			4.4 City	ST-ZIP				
THE		DELETE	5 1 THTLE				Change	Addition
NAME			52 NAM					
STREET ADDRESS			53 STRE	ET ADDRESS	•			
CITY ST-761			54 CITY	-ST-ZIP				
TIT; F		☐ DELETE	6 1 TITLE				Change	Addition
NAME			6.2 NAM		·			
S REET ADDRESS			6.3 STRE	ET ADORESS				
C(1Y - S) - 719			6.4 City	-ST-ZIP				
	hy cortify that the information such	lied with this Julia does not au			ted in Section 119.07(3)(i). Florida Statute	s. I further ce	rtily that	the

r go mereny ceruity triat the information supplied with this filling does not quality 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 in the properties of the receiver of the receiver of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that a properties of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes. I further certify that the information indicated on this annual report is required by Chapter 607, Florida Statutes.

SIGNATURE:

1.5 K. Indere) 4/20/98