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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

May 02 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

 Corporation 	MENT # H85599 APPROVAL, INC.	9 (9)			
Principal Place	of Business	Mailing Address	····	(IBALEN BIBI NATAL BINAR INION NA	ti mintt Bints Grbit nivit mintt nintt inns
~401 N € 91H -81E 36	<u>حاع</u>	1401 N E-STH ST			
FT LAUDERDAI	LE FL- 33301	FT LAUDERDALE FL 93304-	4412-		
				3. Date incorporated or Qualified 11/14/1985	3a. Date of Last Report 05/16/1996
	ace of Business N.E. 597 Court	26. Mailing Address 26. I 720 NES	1018-5	4. FEI Number 59-2635928	Applied For Not Applicable
21 / / 20 , Suite, Apt		26	7,		\$8.75 Additional
22		27	· · · · · · · · · · · · · · · · · · ·	5. Certificate of Status Desired	Fee Required
City & State 23 77. L	monocle, th.	28 Fr. CAUDES	onte, 70	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
^{ZIP} 333	34 Country USA		Country 30 USA	8. This corporation has fiability for Florida Statutes	☐ Yes 🔼 No
	9. Name and Address of Curren			10. Name and Address of New R	egistered Agent
	EDMAN, JOYCE	E. 59 LT.	81 Name		
140 072	ineothol 1720 <i>N</i>	16, 37 CI	82 Street	Address (P.O. Box Number is Not Accepta	ble)
FT	AUDERDALE FL 88864 37	334	83		
		•	84 City		85 Zip Code
					FL
office or reagent. Fail	a fire provisions of Sections 607-050, egistered agent, or both, in the State in familiar with, and accept the obliga	of Florida. Such change was autions of, Section 607.0505, Flor	s, the above-hamed thorized by the corp ida Statutes.	corporation submits this statement for the poration's board of directors. I hereby acce	porpose or changing its registered pt the appointment as registered
	Signature, typed or printed name of registered age		Registered Agent signature	required when reinstating) ADDITIONS/CHANGES TO OFFI	DATE CERC AND DIRECTORS IN 12
12.	OFFICERS AND	DELETE	1 1 Tete F	22 1/ N	Change Addition
NAME	FRIEDMAN, JOYCE		1.2 NAME	FRIEDMAN JOYCE 1720 NE 59% COLLA	
STREET ADDRESS	1401 NE 9TH ST., #38		1.3 STREET ADDRESS	1720 NE 595 COLL	T 2224
CITY-ST-ZIP	FT. LAUDERDALE FL		1.4 CITY - ST - ZIP	PT. LANDERDALE, 76.	33707
TOLE	ST DENISE MERCIER	DELETE	2.1 TITLE 2.2 NAME	DELICE MARGINE	Change Addition
NAME STREET ADDRESS	1401 NE 9TH ST #36		2.3 STREET ADDRESS	DENISE MERCION 1720 N.E. 59 15 Cour	25
C:TY-ST-ZIP	FT. LAUDERDALE FL		2 4 CITY-ST-ZIP	FT. LAUDENDALE, FL	33354
TITLE		DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY - S1 - ZIP TITLE		DELETE	3.4. CITY-ST-ZIP		Change Addition
NAME		had office	4. 2 NAME		manue with the second contraction of
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-71P	****		4.4 CITY-S1-ZIP		
TITLE		☐ DELETE	5 1 TITLE		Change
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		☐ DELETE	6.4 CITY-ST-ZIP		Change Addition
NAME			6.2 NAME		•
STREET ADDRESS			6.3 STREET ADDRESS		
City+St-7iP			6.4 CITY-ST-ZIP		
14. I do heret	by cortify that the information supplier	i with this filing does not qualify	for the exemption s	stated in Section 119.07(3)(i), Florida Statut I that my signature shall have the same leg	es. I further certify that the
t am an o	fficer or director of the comparation or	the receiver or trustee empower	ered to execute this i	report as required by Chapter 607, Florida	Statutes; and that my name
appears i	n Block 12 or Block 13 th hanged, hi			10: 10-	GC1 401
SIGNAT	URE: WAND TYPED OR	PRINTED NAME OF SIGNING OFFICER	FREDM.	ml PRes. 4-25-9	7 734-/83-9//3 Daytime Phone