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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

	1997		2.7	Secretary of State DIVISION OF CORPORATIONS			Secretary of State		
DOCUN 1. Corporation HAIRFAF		# J07615	5 (4)						
Principal Place of Business			Mailing Address	•			 100//10 0/11 00/11 160/7 8/10/11/00 0/11	1186 01011 01011 0164 010	
% PHILIP GREE 8291 S.DIXIE H	WY.		% PHILIP GREENE 8201 S.DIXIE HWY.						
MIAMI FL 33143			MIAMI FL 33143-7717				3. Date Incorporated or Qualified 3a. Date of Last Report		
2. Principal Place of Business			2a. Mailing Address				04/03/1986 4. FEI Number	04/22/1996	Applied For
21			26				59-2723235		Not Applicable
Suite, Apt	#, etc		Suite, Apt. #, etc.				5. Certificate of Status Desired	7	Additional Required
City & State)		Crty & State				Election Campaign Financing Trust Fund Contribution		May Be
7 _(p)	*/. /	Country	Zip				8. This corporation has liability for	Intangible tax under	
24	25 29 30 9. Name and Address of Current Registered Agent				Florida Statutes Yes No 10, Name and Address of New Registered Agent				
GRE	ENE, PHILIP	nu Adoless of Corts	ist negistered Agent		81	Name	IV. Marile and Address of Man Ne	Bistelan waarit	
	SW 148 TE	:RR			62	Street Add	ress (P.O. Box Number is Not Acceptate	lal	
•						DIFFERENCE	1030 (1.0), DOX (10) (100) TO (10) (10) (10)		
MIAMI FL 33158					83				}
					84	City		FL 85 Zip	Code
11. Pursuant to office or no agent. La	to the provisio egistered age m familiar with	ns of Sections 607.05 nt or both, in the Stat , and accept the obliq	02 and 607.1508, Florida State of Florida State of Florida. Such change was gations of, Section 607.0605,	tutes, the abs s authorized Florida Stat	oove- i by utes	named corpora	poration submits this statement for the p tion's board of directors. I hereby accep		its registered is registered
SIGNATURE	Signature Typed o	postudinanse of registered ag	gent and title it applicable. (N	IOTE Registered	Agen	signature requi	red when reinstaling)	DATE	
12.		OFFICERS AF	ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFIC		
TITLE NAME	PD GREENE, I	PHII IP	DELETE	1 1 TIT				Change	Addition
STREET ADDRESS	7570 SW				-	DDRESS			
C-TY - S1 - ZIP	MIAMI FL			1	TY-ST		<u>.</u>		(
TITLE			DELETE	2.1 TH	LE			☐ Change	Addition
NAME				2.2 NA]			}
STREET ADDRESS						DDRESS		4	
COLY-ST-20° Tale			DELETE	3.1 7/7	ITY - ST TLE	- 214		Change	Addition
NAME				3 2 NA	ME				
STREET ADDRESS				3.3 ST	AEET A	ODRESS			
CITY - ST - ZIP			Doriere		TY-ST	- ZIP			
TITLE			DELETE	4.1 111				L Change	Addition
NAME STREET ADDRESS				4.2 %		uddress			
CITY-ST-7IP					TY-ST				Ì
TITLE	,,		DELETE	5.1 TII				Change	Addition
NAME				5.2 NA	ME	į			
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CHY-S1-ZiF			C1 perse		TY - \$1	- 2 P			
THE			DELETE	61 TR				Change	Addition
NAME CONTRACTOR				62 N		DODGCC			}
STREET ADDRESS					REEL A	ADDRESS			

14. I do hereby certify 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 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 orrector 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 if changed if on an attachment with an address.

305 666-3996

FILED

Apr 16 1997 8:00am

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