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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED
May 12 1997 8:00am
Secretary of State

Principal Place of Business 216/8.W. 114TH AVE. DAVIE FL 33325 DAVIE FL 33325 DAVIE FL 33325 (2) (2) Mailing Address Address 2(6) 2(8) 2(14) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(15) 2(
DAVIE FL 3332	25	DAVIE FL 33325-4858										
•						3.	Date Incorporated or Qualified 06/02/1986		ate of Last 29/1996		}	
2. Principal P	Place of Business	2a. Mailing Address	2a. Mailing Address			4.	FEI Number	1		Applied For	1	
21		26	Suite, Apt. #, etc.			ļ	59-2719864			lot Applicable		
Suite, Apt.	#, e 1¢.	} 	Stille, Apt. #, etc.			5.	Certificate of Status Desired			Additional Regulred	{	
City & State	е	City & State	. refd				Election Campaign Financing			D May Be	1	
23		28	T				Trust Fund Contribution		Added	to Fees	-	
Zip 24	Country 25	Z ₁ P	Zip Country			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes					1	
	9. Name and Address of Curre		1301			10	, Name and Address of New Re				1	
2161	MBORU, MARGARET S.W. 114TH AVENUE ME FL 33325			82 83	Name Street Addre	188 (1	P.Ö. Box Number is Not Accepta		85 Zip	o Code	1	
			}	- 1	•			FL	.			
agent. I a SIGNATURE	to the provisions of Sections 607.05 registered agent, or both, in the Statum familiar with, and accept the obli-	gations of, Section 607.0505, Fit gent and tille if applicable. (NO)	C: Registered	Jies.	the corporation	d who	on reinstating)	DATE				
12.	OFFICERS AND DIRECTORS DELETE		13. 1.1 Til	 I f		ADDITIONS/CHANGES TO OFFICERS AND DIRECTO			0/0			
NAME STREET ADDRESS CITY-ST-ZIP	DOMBORU, MARGARET 216) S.W. 114TH AVE DAVIE FL		1.2 NA	ME REET A	ODRESS	•				22E034 /0		
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CITY-ST-ZIP			6.4 CIT								1	
14. I do herel	by certify that the information supplies	ied with this filing does not qual	fy for the	exen	nption stated	in S	ection 119.07(3)(i), Florida Statute	s. I furthe	or certify that	at the		

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 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 if changed, or on an attention cut with an address.

SIGNATURE: MOLDICULT SULL

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Auges 4-29-9

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