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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Feb 05 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

STREET ADDRESS

CITY-SY-ZIP

(3)

DONN SHERBILL AND ASSOCIATES, INC.

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D. Zul Div	-10	NATION AND THE	·········			
Principal Place of Business		Mailing Address		7 (02)/12 4/11 2/2-2 (1922 11)/2 12/11		
		13010 SW 128 ST. MIAMI FL 33186-5880				
					3. Date Incorporated or Qualified 11/17/1986	3a. Date of Last Report 05/01/1996
2. Principal P	lace of Business	2a. Mailing Address			4. FEI Number	Applied For
21		26			59-2746508	Not Applicable
Suite, Apt	#, etc	Suite, Apt. #, etc.			5. Certificate of Status Desired	S8.75 Additional Fee Required
City & State	e	City & State			6. Election Campaign Financing	\$5.00 May Be
23	Constru	28	Courtes.		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country		8. This corporation has liability for i	intangible tax under s. 199.032, Yes No
24	9. Name and Address of Curre	29 ant Registered Agent	30		Florida Statutes 10. Name and Address of New Re	
CUI		on riogiotoroc Agont	81	Name	10, 112110 210 7001000 0, 11011 110	Burner vigativ
	errill, Lorraine 00 s.w. 69 ave					<u> </u>
1	MI FL 33156		82	Street Addre	ss (P.O. Box Number is Not Acceptab	DIE)
MIN	WII FL 33130		83			
			84	City		FL 85 Zip Code
11. Pursuant	to the provisions of Sections 607 05	502 and 607.1508, Florida Statut	es, the above-	named corpo	ration submits this statement for the p	ourpose of changing its registered
agent la	egistered agent, or doin, in the sta int familiar with, and accept the old	gations of, Section 607.0505, Fk	orid <u>a Statutes.</u>	ne corporatio	on's board of directors. I hereby accer	or the appointment as registered
SIGNATURE	Tomais	V	- P			1-29-97
	olignature, typico or printed na contrenist, polis		E: Registered Agent	signature required		DATE
12.		ND DIRECTORS DELETE	13.		ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTORS IN 12 Change Addition
TITLE	VS OUTDOUL LODDANIE	ביי טנגנונ	1.1 TITLE			Cuards [11] volution
NAME	SHERRILL, LORRAINE 13100 SW 69 AVE		1.2 NAME			
STREET ADDRESS			4 0 020557 14			
CITY-ST-ZIP TITLE	MIAMI FL 33156		1.3 STREET A	i		
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Í	P eucopiii D∧NN	DELETE	1.4 CITY-\$T- 2.1 TITLE	i		☐ Change ☐ Addition
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6.3 STREET ADDRESS 64 CITY-ST-ZIP

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 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 attachment with an address.