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

PROFIT CORPORATION ANNUAL REPORT

1997

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUI 1. Corporation NAIDE,		(1)		A COCKING TANKA MAKKA KARAN MAKAL MAKAL MAKAL MAKAL	NIÇIL İLBIL İRAN BANK İLBIK BANK IRBI
Principal Place of Business % LUIS DIKES 136 SEYBOLD ARCADE. 36 NE 1ST STREET MIAMI FL 33132		Mailing Address % LUIS DIKES 136 SEYBOLD ARCADE, 36 NE 1ST STREET MIAMI FL 33132			
				Date Incorporated or Qualified 09/15/1987	3a. Date of Last Report 02/09/1996
	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt	#. etc.	Suite, Apt #, etc.		65-0007978	Not Applicable \$8.75 Additional
22 27				5. Certificate of Status Desired	Fee Required
City & State	é	City & State		6. Election Campaign Financing	\$5.00 May Be
Z ip	Country	28 Z _{(D}	Country	Trust Fund Contribution a, This corporation has liability for it	Added to Fees
24	25	⊢ ¬ '	30		Yes No
	g. Name and Address of Curren	t Registered Agent	81 Name	10. Name and Address of New Re	gistered Agent
DIKES, LUIS 136 SEYBOLD ARCADE 36 NORTHEAST 1ST STREET MIAMI FL 33132			82 Street Addi 83 84 City	ress (P.O. Box Number is Not Acceptab	FL 85 Zip Code
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature typics of provided agent and tilled applicable. (NOTE Registered Agent signature required when renstating) DATE					
12.	OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFIC	
TITLE	DS	☐ DELETE	1.1 TITLE		Change Addition
NAME	DIKES, LUIS		1.2 NAME		
STREET ACCURESS	136 SEYBOLD ARCADE		1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	MIAMI FL DP	☐ DELETE	1 4 CITY-ST-ZIP 2 1 TITLE		Change Addition
NAME	DIKES, IELMA		2 2 NAME		_ ,
STREET ADDRESS	136 SEYBOLD ARCADE		2.3 STREET ADDRESS		
CITY+ST-ZIP	MIAMI FL		2. 4 CITY - ST - ZIP		
TITLE	DT CONATMAN	[_] DELETE	31 TITLE		☐ Change ☐ Addition
NAME STREET ADDRESS	BLATTER, JONATHAN 136 SEYBOLD ARCADE		3 2 NAME 3 3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		3 4. CITY-ST-ZIP		
TITLE	DVP	DELETE	4.1 TITLE		Change Addition
NAME	DIKES, EDWARD B.		4. 2 NAME		
STREET ADDRESS	136 SEYBOLD ARCADE		4.3 STREET ADDRESS		į
CITY-ST-ZIP	MIAMI FL	☐ DELETE	4.4 CHTY-ST-ZIP		Change Addition
TITLE		☐ DETER	5.1 TITLE 5.2 NAME		Change Addition
NAME STREET ADORESS			5.3 STREET ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		DELETE	61 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
CIDELL VUUDESS			A STREET 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 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.

6.4 CITY-ST-ZIP

SIGNATURE:

CITY - ST - ZIP

tuis Dikes

FILED

Jan 17 1997 8:00am

Secretary of State