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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Feb 11 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # K94726

appears in Block 12 or Block 13 if ch

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OF INDUSTRIES, INC.

Mailing Address Principal Place of Business 2655 WEST 8TH AVENUE 2655 WEST BTH AVENUE **HALEAH FL 33010-1201** HIALEAH FL 33010 US 3. Date Incorporated or Qualified 3a. Date of Last Report 06/09/1989 03/04/1996 2. Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For 65-0136002 Not Applicable 26 21 Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 28 Country Zφ $Z_{\rm IP}$ Country This corporation has liability for intangible tax under s. 199.032, 🔀 Yes 🔲 No Florida Statutes 29 30 24 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name DARLOW, DAVID 1111 LINCOLN ROAD - SUITE 500 82 Street Address (P.O. Box Number is Not Acceptable) MIAMI BEACH, FL 33139 83 84 City 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, and accept the obligations of. Section 607.0505, Florida Statutes. SIGNATURE DATE (NOTE: Registered Agent signature required when reinstating) Star it in typed or probat name of registered agent and title it applicable OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6)12. DELETE Reosurer Change 11 TITLE TITLE Jill Fran Liebson LEVINE, SAUL H 1.2 NAME NAME 2755 W. 8 avenue 2655 W 8TH AVE 1.3 STREET ADDRESS STREET ADDRESS HIALEAH FL 33010 CITY- \$1-70 1.4 CITY - ST-ZIP DELE TE Change Addition VS 2 1 TITLE III.,F LIEBSON, JILL F. 2.2 NAME 2755 W 8TH AVE 2.3 STREET ADDRESS STREET ADDRESS HIALEAH FL 2.4 CITY - ST- ZIF CHY+ST-7IP Change Addition DELETE 3.1 TITLE THE 3.2 NAME NAMS 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY - ST - ZIP CITY - ST - ZIP DELETE Change Addition 4.1 TIFLE TITLE 4. 2 NAME NAM 4.3 STREET ADDRESS STREET ADORESS 4.4 CITY - ST - ZIP CITY ST 26 DELETE Change Addition 5.1 TITLE TIME 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADORESS 011Y-51-20 5.4 City - St - ZIP Addition DELETE Change 61 TITLE 1.115 6.2 NAME MAME 63 STREET ADDRESS STREET ADDRESS 6.4 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 corporates or the receiver or trustyd empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name