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

DOCUMENT # L10953

(2)

C/O AMERICAN ACCOUNTING

Mailing Address

20520 SNG CORP.

Principal Place of Business

C/O AMERICAN ACCOUNTING

2. Principal Flanc of Business		001 NE 6TH AVENUE BEACH FL 33160	S. SOCOL. 1700 NORTH MIAME								
22 Suite, Apt. #, ctc Suite, Apt. #, etc. Suite, Apt. #, etc							08/23/1989	F			
Suite, Apt #, etc 27	2. Principal Place of Business 28. Mailing Address						4. FEI Number		Applied Fr	or	
Suite, Apt #, etc 27	21		26				65-0161604		Not Applic	cable	
City & State City & State City	Suite, Apt	#, etc	 				5. Certificate of Status Desired	\$8.75 Additional Fee Required			
24 25 29 30 Florida Statutes	City & Stal	te	—	2			, , ,				
9. Name and Address of Current Registered Agent AMERICAN ACCOUNTING - S. SOCOL 17001 N.E. 6TH AVENUE N. MIAMI BEACH FL 33160 82. Street Address (P.O. Box Number is Not Acceptable) 83. B4. City 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 regist of the 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 registor agent. I am familiar with, and accept the obligations of, Section 607.0505. Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. INTE PD	} Ζιρ τ	├ 1	₁ '	├	Country				ler s 199.03	32,	
AMERICAN ACCOUNTING - S. SUCCUL 17001 N.E. 6TH AVENUE N. MIAMI BEACH FL 33160 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City 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 registor agent Lami familiar with, and accept the obligations of, Section 607.0505. Florida Statutes. SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. INTEL NAMI SIRELADIRESS 20520 BISCAYNE BLVD. DIVEST-ZIP NAMI HIRSCH, STANLEY SIRELADIRESS 20520 BISCAYNE BLVD. DELETE 21 TITLE Change Ad STREET ADDRESS SIGNATURE 22 NAME City Change Ad STREET ADDRESS SIGNATURE 22 NAME City Change Ad STREET ADDRESS SIGNATURE 22 NAME City Change Ad STREET ADDRESS SIGNATURE 22 STREET ADDRESS 22 STREET ADDRESS SIGNATURE Change Ad STREET ADDRESS 22 STREET ADDRESS SIGNATURE Change Ad STREET ADDRESS 22 STREET ADDRESS SIGNATURE Change Ad STREET ADDRESS 24 CITY-ST-ZIP											
17. 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 regist 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 register agent am familiar with, and accept the obligations of, Section 607 0505. Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. THE PD	AMI	FRICAN ACCOUNTING - S. SOC	COL		81	Name					
N. MIAMI BEACH FL 33160 83 11. Pursuant to the previsions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registor agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. 11. TITLE NAME SIREFLADIRES CITY-ST-7IF N. MIAMI BEACH FL STD DELETE 1.1 TITLE 1.2 NAME 1.3 SIREFLADIRES CITY-ST-7IF N. MIAMI BEACH FL 20520 BISCAYNE BLVD. N. MIAMI BEACH FL 21. TITLE 1.1 TITLE 1.2 NAME 22. NAME 23. SIREFLADIRESS CITY-ST-7IF N. MIAMI BEACH FL 22. NAME 23. SIREFLADIRESS CITY-ST-7IF N. MIAMI BEACH FL 24. CITY-ST-7IF N. MIAMI BEACH FL 25. STD DELETE 21. TITLE Change Ad CHITY-ST-7IF Change Ad CHITY-ST-7IF CHANGE 22. NAME 23. SIREFLADIRESS CHITY-ST-7IF N. MIAMI BEACH FL 24. CITY-ST-7IF N. MIAMI BEACH FL 24. CITY-ST-7IF N. MIAMI BEACH FL 24. CITY-ST-7IF 25. STD Change Ad CHITY-ST-7IF Change Ad CHITY-ST-7IF Change Ad CHITY-ST-7IF CHANGE 24. CITY-ST-7IF CHANGE 24. CITY-ST-7IF CHANGE 24. CITY-ST-7IF CHANGE						Stroot Add	set Address /P.O. Roy Number is Not Acceptable)				
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 regists of the corporation submits this statement for the purpose of changing its regists of agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. THE PD SIGNATURE NAME KLEIN, NEIL SIRELADDRESS CHY-SI-ZIP N. MIAMI BEACH FL STD DELETE 1.4 CITY-ST-ZIP HIRSCH, STANLEY 20520 BISCAYNE BLVD. N. MIAMI BEACH FL 21 TITLE Change Ad CITY ST-ZIP Change Ad CITY ST-ZIP CHANGES 23 STREET ADDRESS N. MIAMI BEACH FL 24 CITY-ST-ZIP N. MIAMI BEACH FL 24 CITY-ST-ZIP N. MIAMI BEACH FL 24 CITY-ST-ZIP		• ,			02	Bileet Muu	ress (r.o. box Nomber is Not Acceptab	10)			
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 regist of fice 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 register agent. I am furnithment with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, tylend or part of rame of registered agent and titled approach to (NOTE: Registered Agent signature required when reinstating). DATE					83						
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 register agent. I am furtilling with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, lighted or purple of rame of registered agent and other displaceable (NOTE: Registered Agent signature required when reinstating) DATE					84	City		FL B5	Zıp Code		
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. THE PD	office or	registered agent, or both, in the Stal-	e of Fiorida. Such cha	ande was autho	orized by	the corpora	poration submits this statement for the ption's board of directors. I hereby accep	urpose of chang the appointmen	ng its regist it as register	tered red	
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TIPLE PD	SIGNATURE										
DELETE		Signature, typed or pictric name of registered as	gent and title if approcable			nt signature requ			TO00 11 4		
NAME KLEIN, NEIL 1.2 NAME 20520 BISCAYNE BLVD. 1.3 STREET ADDRESS		provide a construction of the construction of					ADDITIONS/CHANGES TO OFFIC				
20520 BISCAYNE BLVD. 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	*****	,	. ب				•	Olia	יישי גיין איני	JOHLOH	
N. MIAM! BEACH FL 1.4 CITY-ST-ZIP				4		1000000					
THEF STD											
NAME					***	1-ZIP		Cha	nne 🗆 🗘	ddition	
STREET ASDRESS 20520 BISCAYNE BLVD. 2 3 STREET ADDRESS CITY-ST-ZIP N. MIAMI BEACH FL 2 4 CITY-ST-ZIP		1	البسبا					ال ال	ישי בבי	23111011	
CITY-ST-ZIP N. MIAMI BEACH FL 2 4 CITY-ST-ZIP		1				AUDOCCC					
	· · · · · · · · · · · · · · · · · · ·	II. MIAMI DEAOTI L	П)1" LIF		Cha	nge [] Ar	ddition	

6.0.000 Statutes. I further cody that he information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further cody that he information information

3.2 NAME

DELETE

DELETE

DELETE

3.3 STREET AODRESS 3.4 CITY-ST-ZIP

43 STREET ADDRESS

4.4 CITY - ST - 2IP

4.1 TITLE .

4.2 NAME

5.1 TITLE

6.1 TITLE

6.2 NAME

5.2 NAME 5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

SIGNATURE:

NAME

TILLE

THLE

THLE

NAME

STREET ADDRESS

STREET ADORESS

STREET ADDRESS

STREET ADDRESS

City - St - 7H

C(1Y - S1 - 2)F

COY-S1-702

SIGNATURE AND TYPEO OR PRINTED NIME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

Change

Change

☐ Change

800002123568 -03/25/97--01051--021 Addition

Addition

FILED

Mar 25 1997 8:00am

Secretary of State

0519840