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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Jan 31 1997 8:00am

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Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L14722

(7)

STEVEN WISOTSKY, PA

appears in Block 12 or Blo

SIGNATURE:

Principal Place of Business Mailing Address  C/O STEVEN WISOTSKY 3050 JEFFERSON ST. MIAMI FL 33133 MIAMI FL 33133-3818						3. Date incorporated or Qualified 3a. Date of Last Report				
						09/11/1989	02/2	7/1996	Report	
2. Principal f	Place of Business	2a. Mailing Address				4. FEI Number 65-0144334	-		Applied For Not Applicable	
Suite, Apt	. #, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75	Additional Required	
City & Sta	ite	City & State				Election Campaign Financing     Trust Fund Contribution			May Be	
Ζιρ 24	Country 25	Zıp	Country 30	/		B. This corporation has liability for i		· · · · · · · · · · · · · · · · · · ·		
24]	g. Name and Address of Cur		30		·· ·· ···	10. Name and Address of New Re				
WIS	SOTSKY, STEVEN		81	N	lame		<del></del>	<del></del>		
	50 JEFFERSON ST.		82	1	Years Arteles	os (D.O. Day M. Johan in Mal Assaulth		********	<del></del>	
	AMI FL 33133		02	٥	areet Aoore	ss (P.O. Box Number is Not Acceptab	ю)			
<b>,,,,,</b>	/ 2 33 133		83							
			84	C	City			<b>85</b> Zip	Code	
			<u> </u>				FL			
office or	registered agent, or both, in the St am familiar with, and accept the of	ate of Florida. Such change was a digations of, Section 607.0505, Flo	uthorized by rida Statute	y th s.	e corporation	oration submits this statement for the pon's board of directors. I hereby accept	of the appo	intment a	its registered is registered	
12.		AND DIRECTORS	13.	O'R S	Musicus Indone	ADDITIONS/CHANGES TO OFFIC	<del>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>	DIRECTO	)BS IN 12	
TITLE	DP CTTOETTO	DELETE	1.1 TITLE		1	ADDITIONO/OFFACES TO OFFICE		Change		
NAME	WISOTSKY, STEVEN	_	1.2 NAME				•	_ •	_	
STREET ADDRESS	AARA IEEEEDOOM OT		1.3 STREE	T ADE	DRESS					
CITY-ST-ZIP	MIAMI FL		1,4 CITY-							
TITLE		DELETE	2.1 TITLE					☐ Change	Addition	
NAME			2.2 NAME							
STREET ADDRESS			2.3 STREE	t adi	DRESS					
CITY-ST-ZIP			2. 4 CITY-	ST-Z	ZIP					
TITLE		☐ DELETE	3.1 IITLE					Change	Addition	
NAME			3.2 NAME							
STREET ADDRESS	i		3.3 STREE	T ADI	DRESS					
CITY-ST-ZIP			3.4. CITY-	ST-2	ZIP					
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NAME			4. 2 NAME		ŀ	•				
STREET ADDRESS	3		4.3 STREE	t adi	Dress					
CITY-ST-ZIP			4.4 CITY	ST - Z	IP					
TITLE		DELETE	5.1 TITLE				ļ	Change	Addition	
NAME			5.2 NAME							
STREET ADDRESS	5		5.3 STREE							
CITY-ST-ZIP	<u> </u>	DELETE	5.4 CITY-:	ST-2	IP I	· · · · · · · · · · · · · · · · · · ·		☐ Change	Addition	
TITLE			6.1 TITLE 6.2 NAME					OBUIGE	- ADDITION	
NAME CIRCLI ADDRESS			6.3 STREE		DECCC					
STREET ADORESS										
CITY-ST-ZIP	eby certify that the information sun	atied with this filing does not qualif	6.4 CITY -	51•Z emr	otion stated	in Section 119 07(3)(i) Florida Statute	s. I further	certify the	at the	
informat I am an	ion indicated on this annual report officer or director of the corporation	or supplemental annual report is to or the receiver or trustee empow	ue and acc ered to exe	ura	te and that this report	In Section 119.07(3)(i), Florida Statute my signature shall have the same lega as required by Chapter 607, Florida S	l effect as tatutes; ar	if made u id that my	inder oath; that / name	