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

**PROFIT** CORPORATION ANNUAL REPORT

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

**FILED** 

Apr 29 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 **DOCUMENT # 1 16314** 

11)

Principal Place 2525 NW 72ND MIAMI FL 33122 US	A											
•			•					3. Date Incorporated 09/18/1989	or Qualified		te of Last R <b>)5/1996</b>	leport
2. Principal Pl	ace of Busines	is	20.	Mailing Address	3		<del></del>	4. FEI Number		1 00/0		plied For
			26					65-0372793				ot Applicable
Suite Apt			27	Suite, Apt. #, et	o. 			5. Certificate of Status	s Desired			palined
City & State	?		28	City & State				6. Election Campaign Trust Fund Contrib	_			May Be to Fees
Zip		Country		Zip		Country		8. This corporation ha				199.032,
4]	25	d Address of Cu	29	lered Agent	30	<del></del>		Florida Statutes  10. Name and Addres		Yes [		
		·	uieir vahis	tereu Agent		81	Name	TO, Name and Address	15 Of How Inc	Aletelan v	190111	
	IGOLIS, JOHN S.W. 77TH /											
	E 330	nvc.				82	Street Add	ress (P.O. Box Number is	Not Acceptat	010)		
	VI FL 33156-2	2699				63		<u></u>				
******	,,, , , , , , , , , , , , , , , , , , ,					84	City				<b>85</b> Zip	Code
							•			FL		
office or i	edistered agen	a achadh in tha C		uzzioue, riunda-	otatutes, tr	ne adove					ointment as	registered
SIGNATURE		printed name of registere	eo agent and title	if applicable				poration submits this state tion's board of directors. I ared when reinstating)		DATE		
SIGNATURE	Segre e. Specier j	printed name of registere		if applicable	(NOTE: Fleg	gistered Ager				DATE CERS AND	DIRECTOR	RS IN 12
SIGNATURE  12.  III.E	Sara e Spote j	printe Linaries of regulative OFFICERS	eo agent and title	if applicable	(NOTE: Fleg	gistered Ager 13.		red when reinstating)		DATE CERS AND		RS IN 12
SIGNATURE  12.  TILE  NAME	PD MILLON, EF	OFFICERS	eo agent and title	if applicable	(NOTE: Fleg	gistered Ager 13. 11 TITLE 12 NAME	nt signature requi	red when reinstating)		DATE CERS AND	DIRECTOR	RS IN 12
SIGNATURE  12.  TILE  NAME  SIREIT ADDRESS	PD MILLON, EF 2525 NW 7	printe Linaries of regulative OFFICERS	eo agent and title	if applicable	(NOTE: Reg	13. 11 TITLE 12 NAME 1.3 STREET	nt signature requi	red when reinstating)		DATE CERS AND	DIRECTOR	RS IN 12
SIGNATURE  12.  III.E  NAME  SPEET ADDRESS  CITY: ST. ZIE	PD MILLON, EF	OFFICERS	eo agent and title	if applicable	(NOTE: Reg	gistered Ager 13. 11 TITLE 12 NAME	nt signature requi	red when reinstating)		DATE CERS AND	DIRECTOR	RS IN 12
SIGNATURE  12.  III.E  NAME  SIREH ADDRESS	PD MILLON, EF 2525 NW 7	OFFICERS	eo agent and title	If applicable CTORS DELET	(NOTE: Reg	gistered Ager 13. 1 1 TITLE 1 2 NAME 1.3 STREET A	nt signature requi	red when reinstating)		DATE CERS AND	DIRECTOR Change	RS IN 12
SIGNATURE  12.  III.E  NAME  STREET ADDRESS  CITY: ST 2/F  TITLE  NAME	PD MILLON, EF 2525 NW 7	OFFICERS	eo agent and title	If applicable CTORS DELET	(NOTE: Reg	13. 11 TITLE 12 NAME 1.3 STREET 1.4 CITY-ST 2.1 TITLE	ADDRESS	red when reinstating)		DATE CERS AND	DIRECTOR Change	RS IN 12
SIGNATURE  12.  TILE  NAME  SINE T ADDRESS  CITY ST ZIF  TITLE  NAME  STREET ADDRESS	PD MILLON, EF 2525 NW 7	OFFICERS	eo agent and title	If applicable CTORS DELET DELET	(NOTE: Reg	13. 11 TITLE 12 NAME 1.3 STREET A 1.4 CITY-ST 2.1 TITLE 2.2 NAME	ADDRESS 1- ZIP ADDRESS	red when reinstating)		DATE CERS AND	DIRECTOR Change	RS IN 12 Addition Addition
SIGNATURE  12.  HILE NAME SERET ADDRESS CHY-SI-ZIP THILE NAME STREET ADDRESS CHY-SI-ZIP	PD MILLON, EF 2525 NW 7	OFFICERS	eo agent and title	If applicable CTORS DELET	(NOTE Reg	13. 11 TITLE 12 NAME 1.3 STREET 1.4 CITY-ST 2.1 TITLE 22 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE	ADDRESS 1- ZIP ADDRESS	red when reinstating)		DATE CERS AND	DIRECTOR Change	RS IN 12 Addition
SIGNATURE  12.  HILE NAME SPIELLADDRESS CHY SI ZIF THLE NAME SIRELLADDRESS CHY SI-ZIP HILE NAME NAME	PD MILLON, EF 2525 NW 7	OFFICERS	eo agent and title	If applicable CTORS DELET DELET	(NOTE Reg	13. 11 TITLE 12 NAME 1.3 STREET 1.4 CITY-ST 2.1 TITLE 2.2 NAME 2.3 STREET 3.1 TITLE 3.3 NAME	ADDRESS 1- ZIP ADDRESS 1- ZIP	red when reinstating)		DATE CERS AND	DIRECTOR Change	RS IN 12
SIGNATURE  12.  TILE NAME SIRELLADORESS CITY SU ZIF TITLE NAME SIRELLADORESS CITY SI-ZIP TITLE NAME SIRELLADORESS NAME SIRELLADORESS SIRELLADORESS	PD MILLON, EF 2525 NW 7	OFFICERS	eo agent and title	If applicable CTORS DELET DELET	(NOTE Reg	13. 11 TITLE 12 NAME 1.3 STREET 1.4 CITY-ST 2.1 TITLE 2.2 NAME 2.3 STREET 3.5 TITLE 3.2 NAME 3.3 STREET 3.3 STREET 3.3 STREET 3.3 STREET 3.3 STREET	ADDRESS J- ZIP ADDRESS ADDRESS ADDRESS	red when reinstating)		DATE CERS AND	DIRECTOR Change	RS IN 12 Addition Addition
SIGNATURE  12.  TILE  NAME  SIRELLADORESS  CITY ST ZIF  TITLE  NAME  STREEL ADDRESS  CITY ST-ZIP  TILE  NAME  STREEL ADDRESS  CITY ST-ZIP  TILE  NAME  STREEL ADDRESS  CITY ST-ZIF	PD MILLON, EF 2525 NW 7	OFFICERS	eo agent and title	DELE	(NOTE: Reg	13. 11 TITLE 12 NAME 1.3 STREET 1.4 CITY-ST 2.1 TITLE 2.2 NAME 2.3 STREET 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-S 3.4 CITY-S 3.4 CITY-S 3.5 TITLE 3.7 TITLE 3.7 TITLE 3.8 NAME 3.8 STREET 3.9 CITY-S 3.9 TITLE 3.9 NAME 3.9 STREET 3.9 CITY-S	ADDRESS J- ZIP ADDRESS ADDRESS ADDRESS	red when reinstating)		DATE CERS AND	DIRECTOR  Change  Change	RS IN 12 Addition Addition
SIGNATURE  12.  THE NAME STREET ADDRESS CHY-ST-ZIP THE NAME STREET ADDRESS CITY ST-ZIP THE STREET ADDRESS CITY-ST-ZIP THE THE STREET ADDRESS CITY-ST-ZIP THE	PD MILLON, EF 2525 NW 7	OFFICERS	eo agent and title	If applicable CTORS DELET DELET	(NOTE: Reg	13. 11 TITLE 12 NAME 1.3 STREET 1.4 CITY-ST 2.1 TITLE 22 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.3 STREET 3.4 CITY-S 4.1 TITLE 4.1 TITLE	ADDRESS J- ZIP ADDRESS ADDRESS ADDRESS	red when reinstating)		DATE CERS AND	DIRECTOR Change	RS IN 12 Addition Addition
SIGNATURE  12.  10.E  NAME SIRELLADDRESS CITY ST ZIF TITLE  NAME STREET ADDRESS CITY ST-ZIP TITLE  NAME STREET ADDRESS CITY-ST-ZIP TITLE  NAME NAME NAME NAME NAME	PD MILLON, EF 2525 NW 7	OFFICERS	eo agent and title	DELE	(NOTE: Reg	13. 11 TITLE 12 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 22 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.3 STREET 3.4 CITY-S 4.1 TITLE 4.2 NAME 4.2 NAME 4.2 NAME	ADDRESS 1- ZIP ADDRESS 11- ZIP ADDRESS 11- ZIP	red when reinstating)		DATE CERS AND	DIRECTOR  Change  Change	RS IN 12 Addition Addition
SIGNATURE  12.  111.E  NAME SIRELLADDRESS CITY ST 2IF TITLE  NAME SIRELLADDRESS CITY ST-7IP TITLE  NAME SIRELLADDRESS CITY-ST-7IP TITLE  NAME SIRELLADDRESS CITY-ST-7IP TITLE  NAME SIRELLADDRESS CITY-ST-7IP TITLE  NAME SIRELLADDRESS	PD MILLON, EF 2525 NW 7	OFFICERS	eo agent and title	DELE	(NOTE Reg	13. 11 TITLE 12 NAME 1.3 STREET 1.4 CITY-ST 2.1 TITLE 22 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.3 STREET 3.4 CITY-S 4.1 TITLE 4.1 TITLE	ADDRESS 1- ZIP ADDRESS 11- ZIP ADDRESS 11- ZIP ADDRESS 11- ZIP	red when reinstating)		DATE CERS AND	DIRECTOR  Change  Change	RS IN 12 Addition Addition
SIGNATURE  12.  10.E  NAME  SIRELLADDRESS  CITY ST 7/P  TILLE  NAME  SIRELLADDRESS  CITY ST 7/P	PD MILLON, EF 2525 NW 7	OFFICERS	eo agent and title	DELE	(NOTE: Reg	13. 11 TITLE 12 NAME 1.3 STREET 1.4 CITY-ST 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREET	ADDRESS 1- ZIP ADDRESS 11- ZIP ADDRESS 11- ZIP ADDRESS 11- ZIP	red when reinstating)		DATE CERS AND	DIRECTOR  Change  Change	RS IN 12 Addition Addition
SIGNATURE  12.  10.E  NAME  SIRELLADDRESS  CITY ST 7/P  TILLE  NAME  SIRELLADDRESS  CITY ST 7/P	PD MILLON, EF 2525 NW 7	OFFICERS	eo agent and title	DELE	(NOTE: Reg	13. 11 TITLE 12 NAME 1.3 STREET 1.4 CITY-ST 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.3 STREET 3.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-S 4.4 CITY-S 4.5 CITY-S 4.5 CITY-S 4.5 CITY-S 4.5 CITY-S 4.6 CITY-S	ADDRESS 1- ZIP ADDRESS 11- ZIP ADDRESS 11- ZIP ADDRESS 11- ZIP	red when reinstating)		DATE CERS AND	DIRECTOF Change Change Change	Addition Addition Addition
SIGNATURE  12.  TILE NAME SPECIADDRESS CITY SUZIF TILE NAME SPECIADDRESS CITY SUZIF TILE NAME SPECIADDRESS CITY SUZIF TILE NAME SPECIADDRESS CITY-SUZIF TILE NAME SPECIADDRESS CITY-SUZIF TILE SPECIADDRESS CITY-SUZIF TILE	PD MILLON, EF 2525 NW 7	OFFICERS	eo agent and title	DELE	(NOTE Reg	13. 11 TITLE 12 NAME 1.3 STREET 1.4 CITY-ST 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-S 5.1 TITLE 5.1 TITLE	ADDRESS 1- ZIP ADDRESS 11- ZIP ADDRESS 11- ZIP ADDRESS 11- ZIP ADDRESS 11- ZIP	red when reinstating)		DATE CERS AND	DIRECTOF Change Change Change	Addition Addition Addition
SIGNATURE  12.  111.E  NAME SIRELLADDRESS CITY ST 2IF TITLE  NAME SIRELLADDRESS CITY ST 7IP TITLE  NAME  SIRELLADDRESS CITY ST 7IP TITLE  NAME	PD MILLON, EF 2525 NW 7	OFFICERS	eo agent and title	DELET	(NOTE Reg	13. 11 TITLE 12 NAME 1.3 STREET 1.4 CITY-SI 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-SI 5.1 TITLE 5.2 NAME 5.3 STREET 5.4 CITY-SI 5.4 CITY-SI	ADDRESS 1- ZIP ADDRESS T- ZIP ADDRESS T- ZIP ADDRESS T- ZIP ADDRESS T- ZIP ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS	red when reinstating)		DATE CERS AND	DIRECTOR Change Change Change Change	Addition Addition Addition Addition
SIGNATURE  12.  111.E  NAME SIBELLADDRESS CITY ST 2IF TITLE  NAME SIBELLADDRESS CITY ST 7IP TITLE	PD MILLON, EF 2525 NW 7	OFFICERS	eo agent and title	DELE	(NOTE Reg	13. 11 TITLE 12 NAME 1.3 STREET 1.4 CITY-SI 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREET 5.1 TITLE 5.2 NAME 5.3 STREET 5.4 CITY-SI 5.4 CITY-SI 6.1 TITLE	ADDRESS 1- ZIP ADDRESS T- ZIP ADDRESS T- ZIP ADDRESS T- ZIP ADDRESS T- ZIP ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS	red when reinstating)		DATE CERS AND	DIRECTOF Change Change Change	Addition Addition Addition
SIGNATURE  12.  111.E  NAME SIBELLADDRESS CITY-ST-7IP TITLE  NAME NAME	PD MILLON, EF 2525 NW 7	OFFICERS	eo agent and title	DELET	(NOTE: Reg	13. 11 TITLE 12 NAME 1.3 STREET 1.4 CITY-ST 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREET 5.1 TITLE 5.2 NAME 5.3 STREET 5.4 CITY-S 5.4 CITY-S 5.4 CITY-S 6.1 TITLE 6.2 NAME	ADDRESS 1- ZIP	red when reinstating)		DATE CERS AND	DIRECTOR Change Change Change Change	Addition Addition Addition Addition
SIGNATURE  12.  111.E  NAME SIBELLADDRESS CITY ST 2IF TITLE  NAME SIBELLADDRESS CITY ST 7IP TITLE	PD MILLON, EF 2525 NW 7	OFFICERS	eo agent and title	DELET	(NOTE: Reg	13. 11 TITLE 12 NAME 1.3 STREET 1.4 CITY-SI 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREET 5.1 TITLE 5.2 NAME 5.3 STREET 5.4 CITY-SI 5.4 CITY-SI 6.1 TITLE	ADDRESS 1- ZIP	red when reinstating)		DATE CERS AND	DIRECTOR Change Change Change Change	Addition Addition Addition Addition

CHARTASTO Millon G OFFICER OR DIRECTOR 0213988

4/21/97

305/599-2661