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

**PROFIT CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

ANNUAL REPORT 1997			Secretary of State DIVISION OF CORPORATIONS		Secretary of State		
DO 1. co	CUMI irporation Na	ENT # L27558	3 (0)	. V. A. L	1. 6 P. 6 . p. 9 . p. 9 . p. 1		
M	& R FLC	DRAL DESIGN, INC.					
1							
Principal Place of Business Mailing Address							I DIDII DIRIL BIBIL DIBIL DIBIL BIBIL IDDI
20230 S.W. 116TH AVE MIAMI FL 33189			20230 S.W. 116TH AVE MIAMI FL 33189-1032				
					**************************************	3. Date incorporated or Qualified 11/02/1989	3a. Date of Last Report 06/12/1996
2. Prii 21	ncipal Place	e of Business	2a. Mailing Address	2a. Mailing Address		4. FEI Number 65-0152159	Applied For Not Applicable
	ite, Apt. #, e	etc.	Suite, Apt #, etc.	1,,,		5. Certificate of Status Desired	\$8.75 Additional
22	y & State		City & State				Fee Required
23	y G State		28			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zιρ	)	Country Zip Country			у	8. This corporation has liability for	
24	9	[25]  Name and Address of Curre		0]		Florida Statutes  10. Name and Address of New Re	Yes No
<b> </b>		S, CHARLES L.		81	Name	<del></del>	
JONES, CHARLES L.					Street Add	dress (P.O. Box Number is Not Acceptat	ole)
#9   MIAMI FL 33157					<del> </del>		
mirani i C 33137							leel 7: Code
İ				84			FL 85 Zip Code
111. Pr	ursuant to the flice or regis gent if am fa	ne provisions of Sections 607.05 stered agent, or both, in the Stat amiliar with, and accept the obliq	02 and 607.1508, Florida Statutes e of Florida. Such change was au gations of, Section 607.0505, Flori	the aboration the state of the	ve-named cor by the corpora es.	rporation submits this statement for the pation's board of directors. I hereby acce	ourpose of changing its registered of the appointment as registered
SIGN	ATURE Sign	rative, typed or printed name of registered a	gent and title if applicable (NOTE)	Registered A	gent signature req	uired when reinstating)	DATE
12.			ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	
TITLE NAME		PDS HOUSTON, MINNIE	☐ DELETE	1.1 TITLE 1.2 NAME	i .		Change Addition
ſ		0230 SW 116TH AVE			T ADDRESS		
CITY-SI	1-210 N	MAMI FL		1.4 CITY-ST-ZIP			
TRUE		OUOTON DOOGENERT	DELETE	2.1 TITLE		· · · · · · · · · · · · · · · · · · ·	Change Addition
NAME		HOUSTON, ROOSEVELT 20230 SW 116TH AVE		2.2 NAME			
City-Si		MAMI FL		2.4 CITY	ET ADDRESS   - ST71P		
TITLE			☐ DELETE	3.1 TITLE			Change Addition
NAME	ĺ			3.2 NAME	1		
1	ADORESS				T ADDRESS		
CHY-ST	1-20		☐ DELETE	3.4. CITY 4.1 TITLE			Change Addition
NAME				4. 2 NAM	E		-
STREET	ADDRESS.			4.3 STREI	ET ADORESS		
CITY SI	1 - 7(F)		☐ DELETE	4.4 CITY-			Change Addition
TILE NAME			C) percie	5.1 TITLE 5.2 NAME	J		C OTRIBUTE C MOUTION
	ADDRESS				ET ADDRESS		
CITY - S1	1			5.4 CITY	l l		
TITLE			☐ DELETE	6.1 THTLE			☐ Change ☐ Addition
NAME	}			6.2 NAME			
STREEL	ADORESS			63 STREE	T 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.

**FILED** 

Apr 04 1997 8:00am