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 # L35587

(9)

Principal Place of Business 400 SUNNY ISLES BEACH BLVD. P.O. BOX 600825 N. MIAMI BEACH FL 33160 N. Corporation Name Mailing Address 400 SUNNY ISLES BEACH BLVD. P.O. BOX 600825 N. MIAMI BEACH FL 33160					,770.000				
THE MINISTER CO.						3. Date Incorporated or Qualified 12/08/1989		ate of Last Ro /24/1996	aporl
er y	Place of Business	2a. Mailing Address				4. FEI Number			plied For
1] Suite Ap	: # etc.	Suite, Apt. #, etc.				65-0157827 5. Certificate of Status Desired		\$8.75 A	
2 City & Str T	ato	City & State				6. Election Campaign Financing	<u></u>	\$5.00	May Be
3 - Zip •]	Country	28 Zip	Co	untry		Trust Fund Contribution 8. This corporation has liability for Florida Statutes	intangibl Yes	Added to tax under s.	***************************************
1	25 9. Name and Address of Curr		30	<u>1</u>		10. Name and Address of New Re			
PEGG, WILLIAM S II 400 SUNNY ISLES BLVD ROOM 5 N MIAMI BCH FL 33160				81 82 83 84		dress (P.O. Box Number is Not Acceptal	ole)	85 Zip 0	-
GNATURE	Signary extend or pointed name of registered	agent and title if applicable. (f	IOTE: Register	ed Age		rporation submits this statement for the pation's board of directors. I hereby accepted when reinstaling)	DAYE		
2.		AND DIRECTORS	13.		г	ADDITIONS/CHANGES TO OFFICE	CERS AN		
TKE Ame Treet Address Ty-81-216	DP PEGG, WILLIAM S II 1530 SE 14TH ST FT LAUDERDALE FL	☐ DELETE	121 135	TITLE NAME STREET CITY-S	ADDRESS T- ZIP			Change	Addition
ILE MME	DST PEGG, DOLORES E	DELETE	2.1 1	fitle Name				Change	Addition
TREET ADDRESS					ADDRESS				
ITY - ST - ZIP TLE AME	FT LAUDERDALE FL	DELETE	3.1 1	CITY-S FITLE NAME	ST - ZIP			Change	Addition
HEET ADDRESS	S			STREET CITY-S	ADDRESS ST-ZIP				
TLE Ame Heet adoress	4	DELETE	4. 2	IITLE NAME STREET	ADDRESS			Change	Additio
1Y - ST - ZIP 1UE	·	☐ DETELE	5.11	CITY-S TITLE				Change	Additio
ame Treft address (TY-SE-ZE)	5		5.33	name Street City - S	ADDRESS T-ZIP				
TLE IAME TREET ADORESS		DELETE	621	TITLE NAME STREET	ADDRESS			Change	Addition
DELLI BURUMI SC			0.3	o incel	ADDUCTO				

64 CITY-ST-ZIP

14. If oo 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, non an attachment with an address.

HEGUIED

SIGNATURE:

FILED

May 12 1997 8:00am

Secretary of State