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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Jan 24 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1 66910

SIGNATURE:

/71

Principal Place of Business Mailing Address									
11900 BISCAYNE BLVD. SUITE 104 NORTH MIAMI FL 33181		11900 BISCAYNE BLVD. SUITE 104 NORTH MIAMI FL 33181-2726							
HOILLI MINIM	12 00101					3. Date Incorporated or Qualified	į.	e of Last Re	aport
						04/18/1990 04/05/1996			
	ace of Business	2a. Mailing Address				4. FEI Number			plied For
Suite, Apt	* Ab	Suite, Apt. #, etc.				65-0261244		\$8.75 A	t Applicable
2 30(E, Apr.)	# ₁ tite	27				5. Certificate of Status Desired		Fee Re	
City & State	· · · · · · · · · · · · · · · · · · ·	City & State				6. Election Campaign Financing		\$5.00	
3		28				Trust Fund Contribution		Added t	
Zip	Country	Zip	Cou	ntry		8. This corporation has liability for	intangible t	ax under s.	199.032,
4	25	29	30] Yes [
	9. Name and Address of Current	Registered Agent				10. Name and Address of New Re	gistered A	gent	
FRE	DEL, SUSAN]	61	Name				
	4 NE 123RD STND		1	62	Street Addre	ess (P.O. Box Number is Not Acceptate	ole)		'
	220		- 1						
N M	IIAMI FL 33181			В3					
			İ	84	City		FL	85 Zip (Code
office or re agent. Lar SIGNATURE	egistered agent, or both, in the State in familiar with, and accept the obligation of the obligation of the obligation of the obligation of the object of t	of Florida Such change was dions of, Section 607.0505 Fl mand the Capping to the CNO	authorized orida Stati F Registered	d by t utes.	the corporati	oration submits this statement for the points board of directors. I hereby acce	pt the appo	ointment as	registered
12.	OFFICERS AND	DELETE DELETE	13. 1.1 TITLE 1.2 NAME			ADDITIONS/CHANGES TO OFFIC		DIRECTOR Change	S IN 12 Addition
TILLE	PST	L. Dittit				•	·	Change	LI ABUNION
NAME CONCERTORNOUS	FREDEL, SUSAN		1.3 STREET ADDRESS		.nnocce				
STREET ADDRESS	11900 BISCAYNE BLVD.		1.4 CITY						
CHY-SI-ZP TILE	NORTH MIAMI FL 33181	DELETE	21 TITLE		- Fil			Change	Addition
NAME	FREDEL, SUSAN		2.2 NAME						
STREET ADDRESS	11900 BISCAYNE BLVD.		2.3 \$1	REET A	DDRESS				
CITY-ST-7/P	NORTH MIAMI FL 33181		2 4 0	ITY - ST	I-ZIP				
TITLE	11411111 IIII WILL I &	☐ DELETE	3 1 7	ILE				Change	Addition
NAME			3.2 NA	ME					
STREET ADORESS			3.3 \$7	REET A	DDRESS				
CITY - ST - ZIF			3.4. CITY		- ZIP				
TITLE		L DELETE	4.1 III				ļ	Change	Addition
NAME			4. 2 N						
STREET ADDRESS					ADDRESS				
CITY-ST-70F		☐ DELETE	4.4 CITY - 5.1 TiTLE		- ZIP			Chapter	Addition
TIFLE		רו הברבור					ļ	L Change	- YOUROH
NAME PERFET ARMODOS			5.2 NA		nontee				
STREET ADDRESS					ADDRESS				
CHY-S*-ZiP TITLE		DELETE	5.4 CITY 6.1 TITLE		- £1F			Change	Addition
NAME			6.2 NAM				,		
STREET ADDRESS					ADDRESS				
CITY - STZIP			•	TY-ST			`		
14. Ldo heret	by certify that the information supplied	d with this filing does not qua	lify for the	exen	notion stated	in Section 119.07(3)(i), Florida Statute	s. I further	certify that	the
informatio Lam an o	on indicated on this annual report or s	upplemental annual report is the receiver or trustee empo	true and a wered to a	1CCU1	rate and that	my signature shall have the same leg- as required by Chapter 607, Florida	al effect as	if made un-	der oath; th

Date

Daytime Phone #