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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Jan 22 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # L81898

(3)

SIGNATURE: Sleng Educid FAFNA EHALICH + 01-13-1997
Light SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ERLK CO.

Principal Pla	ope of Business		Molling Adde		:					
Principal Place of Business Mailing Address 10102 SW 23 ST. 10102 SW 23 ST. MIAMI FL 33165 MIAMI FL 33165-7408										
								3. Date Incorporated or Qualified 06/20/1990	3a. Date of Las 02/05/1996	
2. Principal	Place of Business	2a. Mailing A	2a. Mailing Address				4. FEI Number		Applied For	
21	4 h .4	26					NOT APPLICABLE	······································	Not Applicable	
Suite, Apt #, etc			27 Suite, Apt	Suite, Apt. #, etc.				5. Certificate of Status Desired	1 1 '	5 Additional Required
City & State 23			City & Sta	City & State				Election Campaign Financing Trust Fund Contribution		00 May Be
Zip	[C	Zip Country			niry		This corporation has liability for intangible tax under s. 199.032,			
24	25		29	30			Florida Statutes Yes No			
		ddress of Curre	ent Registered Ager	nt		221		10. Name and Address of New Re	gistered Agent	
	IRLICH, HARRY					81	Name			
10102 SW 23 ST. Miami FL 33165				82 Street Ad			Street Addre	ess (P.O. Box Number is Not Acceptab	le)	
1718	, Will 1 2 00 100				ļ	83	,	· · · · · · · · · · · · · · · · · · ·		
						84	City		FL 85 Z	ip Code
11. Pursuan	nt to the provisions of	Sections 607.05	02 and 607 1508, FI	lorida Statul	les, the ab	ove	-named corpo	oration submits this statement for the p	urnose of changin	g its registered
_		both, in the Stat Laccept the obli	le of Florida, Such of gations of, Section 6	nange was 607.0505, FI	authorized orida Statu	i by ites	the corporati	on's board of directors. I hereby accep	ot the appointment	as registered
SIGNATURE		d name of registered a	gen, sild tille diapplicable.	(NOT	L Registered	Age	nt signature require	ed when reinstating)	DATE	
12.		OFFICERS A	ND DIRECTORS	·	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECT	ORS IN 12
TITLE	DP] DELETE	5.1 TO	LE			Chang	ge Addition
NAME	EHRLICH, HAP				1.2 NA	ME				
STREET ADDRESS					1.3 \$16	REET	ADDRESS			
CITY-ST-ZIF	MIAMI FL 3316	13		I DELETE	1.4 CIT		T-ZIP			
TITLE	EHRLICH, ELE	NA.	Ŀ.J) DECETE	2.1 TIT				Chang	ge L.J Addition
NAME STREET ADDRESS	40400 0141 00				2.2 NAI		ADDOCCC			
CITY-ST-ZIP	MIAMI FL 3316				1		ADDRESS			
TITLE	T T			DELETE	2.4 CI		1-ZIP		☐ Chang	e Addition
NAME	EHRLICH, PAT	RICIA	-		3.2 NA					
STREET ADDRESS	40400 0144 00						ADDRESS			
CITY-ST-ZIP	MIAMI FL 3316	15			3.4 CI	IY-S	T-ZIP			
TITLE	S			DELETE	4.1 111	LE			☐ Chang	ge 🔲 Addition
NAME	EHRLICH, JAM				4. 2 NA	ME				
STREET ADDRESS					4.3 STF	REET	ADDRESS 1			
CITY-ST-ZIP	MIAMI FL 3316	15		.	4.4 CIT		T- 21P			
TITLE			L.) DELÉTE	5.1 TIT			•	L. Chang	ge Addition
NAME					5.2 NAI					
STREET ADDRESS	<i>i</i>						ADDRESS			
CITY-ST-7IP TITLE				DELETE	5.4 CIT 6.1 TIT		1 - ZIP		Chang	e Addition
NAME			Ll	, WELLIL	6.2 NA				L. O.K.	io Ci vaciliali
STREET ADDRESS							ADDRESS			
CHY-ST-7IP	`				6.4 CIT					
14. I do here	eby certify that the in	iformation suppli	ed with this filing do	es not quali	ify for the e	exer	mption stated	In Section 119.07(3)(i), Florida Statute	s. I further certify th	nat the
informat Lam an	tiori indicated on this	annual report or the corporation of	supplemental annua or the receiver or true	al report is I stee empov	true and a vered to ex	ccu	rate and that	my signature shalf have the same lega as required by Chapter 607, Florida S	l effect as if made	under oath; that