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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

1997			Socretary DIVISION OF CO			Secretary of State	
	MENT # OF PROPERTIES	L94403 s, INC.	(7)	·		 	
Original Disc	on al Puercia		Mailing Address]
Principal Place of Business 432 N.E. 3RD AVE			432 N.E. SRD AVE				
FT. LAUDERDALE FL 33301			FT. LAUDERDALE FL 33301-3234				
						3. Date Incorporated or Qualified 08/20/1990	3a. Date of Last Report 01/29/1996
	face of Business		2a. Mailing Address			4. FEI Number 65-0220476	Applied For Not Applicable
Suite, Apt. #, etc.			Suite, Apt #, etc			¢0.75	
22			27		5. Certificate of Status Desired	Fee Required	
City & State			City & State		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
Zφ	† " I	Country	Zip	30 Cou	intry	This corporation has liability for Florida Statutes	intangible tax under s. 199.032, Yes No
24	[25] 9. Name and	Address of Current F	29 tegistered Agent	[30]		10. Name and Address of New Re	
CA'	YIA, EDWARD, J				81 Name		
432	N.E. 3RD AVE				82 Street Add	dress (P.O. Box Number is Not Acceptal	ble)
FT.	LAUDERDALE F	FL 33301			83		
					83		
					84 City		FL 85 Zip Code
11. Fursuant office or agent La	registereð agónt, í am familiar with, a	of Sections 607,0502 a both, in the State of accept the obligation accept the obligations are ranged instances.	Florida. Such change wa ins of, Section 607.0505,	s authorize Florida Sta	a by the corpora tutes.	rporation submits this statement for the ation's board of directors. I hereby acce	purpose of changing its registered opt the appointment as registered
12.	Sufficiently of the art for the or	OFFICERS AND I		13.	o riginii tiigi tiiort ista	ADDITIONS/CHANGES TO OFFIC	
11-16	DP		☐ DELETE	1.1 T	TLE		☐ Change ☐ Addition
NAME	CAYIA, EDW			1.2 N	j j		
STREET ADDRESS	432 N.E. 3RE FT. LAUDERS				TREET ADDRESS		
COLY ST ZIP	FI. DAUDENI	// TE	DELETE	1.4 C	ITY-ST-ZIP		☐ Change ☐ Addition
NAME				2.2 N			
STREET ACCRESS				2.3 \$	TREET ADDRESS		
CHY- \$1-20			.,	2 41	CITY-ST-ZIP		
1-114			☐ DELETE	31 T			Change Addition
NAME CARLLE A DEPOSE ST				32 N	TREET ADDRESS		
STREET ADDRESS OF MASTEZIE					CITY-ST-ZIP		
10.1			☐ DELETE	4.1 T			Change Addition
NAME				4.21	AME		
STREET ADDRESS					TREET ADORESS		
CHY S1-7#	<u> </u>		DELETE		ITY-ST-ZIP		Change Addition
THE			FT DECEIE	5.1 T 5.2 A	IAME		C. C. Salle C. Manhon
NAME STREET ADDRESS					TREET ADDRESS		
City St-7ift					:ITY-S1-Z:P		
TIFLE	·	y,	DELETE	611	ITLE		Change Addition
NAME				621	IAME		
STREET ADDRESS				6.3 9	TREET ADDRESS		
C(0) - 5" Z(P				6.4 0	CITY - ST - ZIP		

14. To be 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.

SIGNATURE:

AG OFFICER ON DIRECTOR CAYIA, SP 3/18/47 954/765-1400

FILED

Mar 26 1997 8:00am