FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF COFFORATIONS

1996

1. Corporation	MENT # MO27 I L. BILZIN, P.A.	779	(0)				YIR (DII AZBA) DIBIK GYAKI I	1811 84811 81811 1881
Principal Place	of Business	Mailing Addi						
C/O BRIAN BILZIN 2500 FIRST UNION FINANCIAL CENTER MIAMI FL 33131-2336 Mailing Address P O BOX 019109 MIAMI FL 33101-9109 US								
		00				3. Date incorporated or Qualified 07/13/1984	3a. Date of Last 04/19/	
2. Principal Pla	ace of Business	2a. Mailing A	daress			4. FEI Number		Applied For
21 Suite, Apt. #	i elc	26 Suite, Ap	+ L etc			59-2442579		Not Applicable
City & State		27				5. Certificate of Status Desired	1 1	75 Additional e Required
23]		City & Sta	ete			6. Election Campaign Financing		00 May Be
Zip	Country	Zip		ountry		Trust Fund Contribution 8. This corporation has liability for	Add	led to Fees
24	25	29	30	•		Florida Statutes Yes	intangibile tax under [] No	s 199.032,
·	9. Name and Address of Curr	ent Registered Age	nt	-1	T	10. Name and Address of New R	legistered Agent	
RII אול	BRIAN L.			81	Name			
	rst Union Financial Cent	FR		82	Street Add	dress (P.O. Box Number is Not Acceptab	ile)	
MIAMI F		Lft		83				
				84	T,	pration submits this statement for the pur		Zip Code
SIGNATURE	althurum phoed on bringed renor of registrond after	over the record from	(NOTE Registe	ed Age		pration submits this statement for the pur and of directors. I hereby accept the appo	DATE	
TITLE	DP OFFICENS A		DELETE 1	1. ! TITLE		ADDITIONS/CHANGES TO OFFI		
NAME.	BILZIN, BRIAN L.	<u> </u>		NAME		•	☐ Change	Addition
STREET ADDRESS	2500 FIRST UNION FINAN	CIAL CENTER			ADDRESS			
CITY-S1-ZIP	MIAMI FL			CITY - S	T- Z(P			
TITLE NAME	ts Bilzin, Brian L.			THILF			Change	Addition
STREET ADDRESS	2500 FIRST UNION FINANCE	MAI CENTED		2.2 NAME 2.3 STREET ADDRESS				
CiTY - ST - ZiP	MIAMI FL	JAL OLITICA						
TITLE				CITY-S	1-137		Change	☐ Addition
NAME		_		NAME			onange	T VOORDII
STRELT ADDRESS			3.3	STREET	ADDRESS			
CITY-ST-ZIF			C . C . c	CITY-S	I-ZIP			
NAME		[_] D		TITLE			☐ Change	Addition Addition
STREET ADDRESS				NAME	ADDDGGG			
CITY-ST-ZIF					ADDRESS			
TITLE			F. C	CITY-SI TITLE	- 740		☐ Change	Addition
NAME			52	NAME			L. Orientige	Find Modified
STREET ADDRESS			5.3	STREET.	ADDRESS			
CITY-ST-ZIP TITLE			C. C.C.	CITY-SI	I - ZIP			
NAME		Γ"} n		TIFLE			Change	Addition
STREET ADDRESS				NAME Stockti	Abhoeco			
CITY-ST-ZIP			64	NIV-SI	ADDRESS .			
 I do hereby of certify that the oath; that I a appears in B 	certify that the information supplied he information indicated on this ann am an officer or director of the corp Block 12 or Block 13 for placed or	with this filing is volu ua' report or supplen oration or the receive on a futtachment wi				or the exemption stated in Section 119.0 te and that my signature shall have the s s report as required by Chapter 607, Flor	7(3)(k), Florida Statu ame legal effect as i rida Statutes; and th	tes. I further f made under at my name

SIGNATURE:

SIGNATURE AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-27-96 305-374-7580 Date Dayne Price #