SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED Jul 22 1997 8:00am Secretary of State

DOCU 1. Corporation SOCHE	MENT PINAME T & CON	# 1PAN	M0362 IY, INC.	5	(4	4)									
Principal Place of Business Mailing Address														DIDIR DIDIR DIE	
8350 SOUTH DIXIE HWY 8350 S DIXIE HWY															
STE 1260 STE 1260															
MIAMI FL 33156 MIAMI FL 33156 US US										_	DO NOT WRI				
					00					3.	Date Incorporated or Qualified 08/06/1984	' 3		te of Last F	teport
2. Principal Place of Business					2a. Mailing Address					-	FEI Number		- 04/	30/1996	oplied For
											59-2436797				ot Applicable
Suite, Apt. #, etc.					Suite, Apt. #, etc.					-					Additional
22					27					5.	Certificate of Status Desired		J		equired
City & State					City & State					6.	Election Campaign Financing			\$5.00	May Be
23	23					28					Trust Fund Contribution]		to Fees
Zip	Country			29	Zip	Country 30			8.	This corporation owes or has p					
24	25	Address of Currer						Personal Property Tax due Jur		_		_] No			
90	CHET, IRA	artu	Address of Currer	it Hegi:	stered Agent	• • • • • • • • • • • • • • • • • • • •	81	Т	Name	10.	Name and Address of New I	tegist	ered A	gent	
	50 S DIXIE	HWY							INAILE						
STE 1260							82		Street Addre	ress (F	P.O. Box Number is Not Accept	able)			
	MI FL 331	58					83	-							
*****	=	•													
							84	1	City				FL	85 Zip	Code
11. Pursuant	to the provis	ions c	Soctions 607.050	2 and 6	607.1508, Florid	da Statute	es, the above	0	named corpo	ooratio	n submits this statement for the	purp	oco of	L L Changing i	ls registered
Office of f	egi ste rod ag	jent, c	ir both, in the State id accept the obliga	Of Flore	ida. Such chan	ge was a	iuthorized b	٧t	he corporation	lion's t	poard of directors. I hereby acc	ept th	e appo	ointment as	registered
SIGNATURE			a accept the obligi	110113	a, deciron con .	0500,110	nioa Statute	٥.							
SIGNATORE	Signature, typied	or print	ed name of registered ago	nt and title	e if applicable	(NOTE	Rug stored Ag	ent	signature require	red when	reinstating)	0	DATE		
12.			OFFICERS AN	DIRE			13.			7	ADDITIONS/CHANGES TO OFF	ICERS			RS IN 12
TITLE	CD CHE	IDA			DE	LETE	1.1 TITLE							Change	☐ Addition
NAME	SOCHET, IRA 9350 S DIXIE HWY STE 126						1.2 NAME								
STREET ADDRESS	MIAMI F	DIVIE	11M1 OIL 1200				1.3 STREET ADDRESS								ļ
CITY-ST-ZIP	INIO III) r rr	1.4 CITY-	ST -	Z IP						
TITLE					□ DE	LEIE	2.1 THTLE							Change	☐ Addition
NAME DEDECT ADDRESS							2.2 NAME								
STREET ADDRESS							2.3 STREE								
CITY-ST-ZIP TITLE	····	· · · · · · · · · · · · · · · · · · ·			☐ DE	LETE	2.4 City- 3.1 Title	51-	- 201					Change	Addition
NAME					الا ت		3.2 NAME						ı	violige	C PROUTON
STREET ADDRESS							3.3 STREE	T A T	DORESS						į
CHTY-ST-ZIP							3.4 CITY-								Ī
TITLE					☐ DE	LETE	4.1 TITLE	91"	k ri					Change	Addition
NAME							4. 2 NAME								
STREET ADDRESS							4.3 STREE		ODRESS						
CITY-ST-ZIP							4.4 CHY-				•				
TITLE					☐ DE	LETE	51 TITLE							Change	Addition
NAME							5.2 NAME								
STREET ADDRESS							5.3 STREE	A(DDRESS		•				
CITY-ST-ZIP							5.4 CITY-	31-	ZIP						
TITLE					☐ DE	LETE	6.1 TITLE						1	Change	Addition
NAME							6.2 NAME								
STREET ADDRESS							6.3 STREE	AD	ODRESS]
CITY-ST-ZIP			formation cumplion				6.4 CITY -	31-2	ZIP						j

r up nervoy 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 eath; that I am an officer or director of the corporation of the receiver or trueton empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if chapter, or on an attachment with an address.