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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

ANNUAL REPORT 1997				B. Mortham ary of State CORPORATI	of State		Secretary of State				
 1. Corporation 	MENT # M i Name N & ASSOC., CO	23963 RP.	(5)								
Principal Flace of Business Mailing Address 3372 CORAL WAY 3372 CORAL WAY MIAMI FL 33145 MIAMI FL 331454 US US				VAY							
						\[\big	 Date Incorporated or Qualified 11/27/1985 		ite of Last Re 01/1996	aport	
2. Principal Pl	ace of Business	2a. Mai 26	ling Address				4. FEI Number 59-2612148			plied For t Applicable	
Suite, Apt	#, etc	Suit	le, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 A		
City & State)	City	& State				6. Election Campaign Financing Trust Fund Contribution		\$5.00 Added t		
23 Zip 24	Countr 25	y Zip		Countr	у		This corporation has liability for Florida Statutes		tax under s.		
, 		ss of Current Registere	d Agent	(00)		L	10. Name and Address of New I				
3372	, DOMINGO E. 2 CORAL WAY AI FL 33145			81 82 83		Addres	s (P.O. Box Number is Not Accept	able)			
				84	City			FL	85 Zip (Code	
SIGNATURE	Signature, typno or priored nam	lions 607,0502 and 607.1, in the State of Florida, Seept the obligations of, Seept the obligations of, Seept the Oliver and title if appropriate the property of the CERS AND DIRECTOR	Loable (NC	TE: Registered Ac		required	ation submits this statement for the s's board of directors. I hereby acc when reinstating) ADDITIONS/CHANGES TO OF	DATE			
NAME STREET ADDRESS City-SI-Zip	GIDI, DOMINGO E. 3372 CORAL WAY MIAMI FL		METER	1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-	T ADDRESS	33	NNELL,OCTAVIO 72 CORAL WAY AMI, FL	J	Li Criange	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GIDI, DOMINGO E. 3372 CORAL WAY MIAMI FL		☐ DELETE	2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY	t aodress				Change	Addition	
THEF NAME STREET ADDRESS CHY-SI-ZIP	VD GIDI, LILA 3372 CORAL WAY MIAMI FL		DELETE	3.1 TITLE 3.2 NAME	T ADDRESS				Change	☐ Addition	
TITLE NAME STREET ADDRESS			☐ DELETE	4.1 TITLE 4. 2 NAMI 4.3 STREE	T ADDRESS				Change	Addition	
CITY - ST - ZIP TITLE NAME STREET ADDRESS			☐ DELETE	l and an anal	T ADDRESS				Change	Addition	
COLY - ST - ZIP TITLE NAM: STREET ADDRESS			DELETE	6.1 TITLE 6.2 NAME 6.3 STREE	T ADDRESS				Change	Addition	

14.1 do 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 regular or trastee empowered to execute this report as required by Chapter 807, Florida Statutes, and that my name appears in Block 12 or Block 13 if granged or of a attackment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED MAME OF SIGNING OFFICER OR DIRECTOR

APR. 22.

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FILED

May 05 1997 8:00am

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