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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

Feb 27 1997 8:00am

Sandra B. Mortham

	JAL REPORT	Secretary DIVISION OF C		Secreta	ary of State
DOCUI	MENT # M290	• •			A(A(1 8.6); A(4); A(4); A(4); A(4); B(4); A(4);
Principal Place	o of Business	Mailing Address			<u> </u>
13335 SW 88 AVE MIAMI FL 33176		12201 SW 69 COURT MIAMI FL 33156-5425			
US				3. Date Incorporated or Qualified 03/13/1986	3a. Date of Last Report 03/29/1996
2. Principal P 21	Sacri of Business	2a. Mailing Address		4. FEI Number 59-2655524	Applied For Not Applicable
Suite, Apt. #, etc		Suite, Apt. #, etc		5. Certificate of Status Desired	\$8.75 Additional Fee Required
22] ——City & Stati 23	e	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zφ	Country 25	Zip	Country 30	8. This corporation has fiability for	
24	9. Name and Address of Cur		301	10. Name and Address of New Re	
MC	HUGH, PAMELA F.		81 Name	10145-10-0	
1220	01 SW 69 COURT		82 Street Add	ress (P.O. Box Number is Not Acceptat	vie)
MIA	MI FL 33156		63		
			[5]		
			84 City		FL 85 Zip Code
office or r	registered agent, or both, in the St	tate of Florida Such change was a oligations of, Section 607,0505, Flo	uthorized by the corpora rida Statutes.	poration submits this statement for the pation's board of directors. I hereby acception	ot the appointment as registered
	Signature type dint printed manus of registered	ragent and title of appropriate (NOTE AND DIRECTORS	: Registered Agent signature requ	ulred when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE DEPC AND DIDECTORS IN 12
12.	PD	DELETE	11 TITLE	ADDITIONS/CHANGES TO OFFIC	Change Addition
NAME	MCHUGH, PAMELA F.		1.2 NAME		_ - -
STEEL ADURESS	12201 SW 69 CT.		1.3 STREET ADDRESS		
CHY-ST ZIP	MIAMI FL		1.4 CITY-ST-ZIP		
TPLŧ	D	☐ DELETE	2.1 TITLE		Change Addition
NAME	MCHUGH, J. BARRIE		2.2 NAME		
STHUT ADDRESS	12201 SW 69 CT. MIAMI FL		2.3 STREET ADDRESS		•
CTY-S1_Z-P TIFLE	MEAN I W	DELETE	2. 4 CITY-ST-ZIP 3.1 Title		Change Addition
NAVE			3.2 NAME		
STREET ADDAESS			3.3 STREET ADDRESS		
City St-7iF			3.4. CITY-ST-ZIP		
TIFLE		☐ DELETE	4.1 TITLE		Change Addition
NAME ELECTRONIC	İ		4. 2 NAME 4.3 STREET ADDRESS		
STHEFT ACTORESS CITY - ST - Zer			4.5 STREET ADDRESS		
THUE		DELETE	517RLE	, , , , , , , , , , , , , , , , , , ,	Change Addition
NAME			5 2 NAME		
SIRFELALORESS			5.3 STREET ADDRESS		
OHY-S1 24		COLUMN TO SERVICE STATE	54 City - ST - ZIP		Change Change
THE		[] DELETE	61 TITLE		Change Addition
NAME On a Laborator			6.2 NAME		
STEEF LADORESS			6.3 STREET ADDRESS 6.4 CITY - ST - ZIP		
C(Tr - \$1, ZIP 14. I do here	t	plied with this filing does not qualif	y for the exemption state	od in Section 119.07(3)(i), Florida Statute	s. I further certify that the
is descent the	an endicated or this somest concel-	or cumulamental annual terroit is tr	ue and accurate and tha	at my signature shall have the same lega ort as required by Chapter 607, Florida S	al effect as if made under path: that

Name of Gening Officer or DIRECTOR . Me Hugh, Prosident 2/21/97 (305)056-404