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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M37274

(1)

Principal Plac 7328 S.W. 48TI MIAMI FL 3315	H ST.	Mailing Ad 7328 S.W. 4 MIAMI FL 3	ISTH ST.	······	1987., M.M.				
						3. Date Incorporated or Qualifie 08/25/1986	3a. Date o 04/25/		port
2. Principal P 21	lace of Business	2a. Mailing 26	Address			4. FEI Number 59-2760067		1	olied For Applicable
Suite, Apt	#, etc	Suite, A	Apl. #, etc.	÷		5. Certificate of Status Desired	□ \$	8.75 A	dditional
22 City & Stat	0	27 City & 5	State		 	6. Election Campaign Financin	<u> </u>	Fee Rec \$5.00 i	·
23		26				Trust Fund Contribution		Added to	
Zφ	Country	Zip	·	Count	try	8. This corporation has liability			199.032,
24	25] 9, Name and Address of	29 Current Registered A		30		Florida Statutes 10. Name and Address of New	Yes X N		
NEV	VMAN, DOROTHY	Carrott Hogistoria A	, on		1 Name	10. 142110 010 1001000 01 11011	riogistoreo Ago		
	S.W. 48TH ST.								
	J 0.11. 40111 01.			8	Street A	ddress (P.O. Box Number is Not Accep	otable)		
MIA	MI FL 33155			8	13				
}				6	4 City		(8:	5 Zip C	ode
44 6	10.0	007.0000 4000	Firster Oast da				FL °	1	
office or r	to the provisions of Sections (egistered agent, or both, in the	he State of Florida, Such	change was a	s, the about	by the corp	corporation submits this statement for the oration's board of directors. I hereby ac	ie purpose of cha cept the appointr	nging its nent as r	registered egistered
l	im familiar with, and accept th	he obligations of, Section	n 607.0505, Floi	rida Statut	les.				ļ
SIGNATURE	Signature, typed or panied name of reg	istered agent and tide if applicable	e (NOTE	Registered A	Agent signature	required when reinstating)	DATE		l
12.		ERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO O	FFICERS AND DI	RECTOR!	3 IN 12
1)1LF	DP		DELETE	11 TITL	E			Change	☐ Addition
NAME	NEWMAN, DOROTHY			1.2 NAM	E .				
STREET ADDRESS	7328 S.W. 48TH ST.			1.3 STRE	EET ADDRESS				3
CITY-ST-ZIF	MIAMI FL		T neutre		-ST-ZIP				
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CITY ST-7P				2.2 NAM 2.3 STRE	EET ADDRESS			Change	Addition
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14. I 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 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:

STAY MEWMAN IN TYPES OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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FILED

Apr 09 1997 8:00am

Secretary of State

Daytime Phone #

0209529