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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

May 02 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # M57487

(4)

1. Corporation ACTION		PREPARATIONS		(+)						
Principal Place of Business Mailing Address						··	1		ALDII FIRM ANDII	
730 NE 130 ST NORTH MIAMI FL 33181 US			730 N.E. 130 ST. NORTH MIAMI FL 33161-7527 US							
							3. Date incorporated or Qualifier 08/17/1987		ate of Last Ro / 29/1996	eport
2. Principal Place of Business			2a. Mailing Address 26				4. FEI Number 65-0005126		· · ·	oplied For ot Applicable
Suite, Apt.			Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 A Fee Re		
City & State	le		City & Sta	City & State			Election Campaign Financing Trust Fund Contribution		\$5.00 Added t	
Zip 24	25		Z(p)	29 30		′			□ No	199.032,
	9. Name a	and Address of Curre	nt Registered Age	nt		·	10. Name and Address of New	Registered	Agent	
	ITE, PAUL				81	Name				
1703 N.E. 142ND STREET						Street Add	dress (P.O. Box Number is Not Acceptable)			
NORTH MIAMI FL 33181				83						
					84	,		FL	85 Zip C	
11. Pursuant office or r agent. I a	to the provision to the provision to the provision to the provision to the total to the provision to the pro	ons of Sections 607.05 ent, or both, in the State h, and accept the oblig	02 and 607,1508, FI e of Florida. Such ch gations of, Section 6	iorida Statute nange was ai i07.0505, Floi	es, the above uthorized by rida Statute	e-named cor / the corpora s.	poration submits this statement for the tion's board of directors. I hereby acc	purpose of	f changing its pointment as	s registered registered
SIGNATURE	Clonet so t read o	or printed name of registered as	and a James I are Small	AIOT	ta et herea		irod when (cinstating)			
12.	Signature, types c		ND DIRECTORS	(NC)II	13.	nt signature requ	ADDITIONS/CHANGES TO OF	DATE FICERS AND	DIRECTOR	S IN 12
TITLE	D DELETE			DELETE	1.4 101.6				Change	Addition
NAME	WHITE, LA	A JUAN								
STREET ADDRESS 1703 N.E. 142ND STREET			1.8 STREET ADD			ADDRESS				
CITY-ST-ZIP	NORTH M	iami fl			1.4 C(TY - 9	31 - 2(P				
TITLE	D) DELETE	2.4 TITLE]			Change	Addition
NAME .	WHITE, PAUL				2.P NAME					
STREET ADDRESS	1,000 11.2. 11.2.12			2.8 STREF1						
CITY-ST-ZIP	NORTH M	IAMI FL		I pri cić	2. 4 CITY -	S1 - ZO ²			- 	Arres
TITLE			L l	DELETÉ	3.0 T(TLF				☐ Change	Addition
NAME STREET ADDRESS					3.8 NAME	**************************************				
	ļ ·				3.8 STREET	1				
CITY-ST-ZIP TITLE				DELETE	3.#. CHY- : 4.F TO LE	51-21			Change	Addition
NAME				,	4. 2 NAME				L. J onlings	
STREET ADDRESS					4.8 STREET	ADDRESS				
CITY-ST-ZIP					4.4 CITY - S	ļ				
TITLE				DELETE	5.1 TITLE				Change	Addition
NAME					5.2 NAME					
STREET ADDRESS					5.8 STRECT	ADDRESS				
CITY-ST-ZIP					5.4 City-S	1 - ZIP				
TITLE				DELETE	61 TITLE				Change	Addition
NAME					€ \$ NAME					
STREET ADDRESS					6.8 STHEFT	ADDRESS				
CITY-ST-ZIP	<u></u>		··		64 CITY-S	T - 7IP				

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 indicator 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 tam 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 oil an attachment/with an address.