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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # M76370 (9)CYNTHIA GREENHOUSE-TIANO, P.A.

FILED Apr 14 1997 8:00am Secretary of State



Principal Place of Business 4070 NE 18TH AVE. FT. LAUDERDALE FL 33334		4070 NE	Mailing Address 4070 NE 18TH AVE. FT. LAUDERDALE FL 33334-5438							
							3. Date Incorporated or Qual 04/13/1988	ified 3a. Da 05/ (te of Last R)1/1996	eport
2. Principa! Place o	├ ¬	2a. Mailing Address				4. FEI Number 65-0043672			oplied For	
Suite Apt. #. etc.			Suite, Apt. #, etc.				00 00 00 12		ot Applicable Additional	
22	27					5. Certificate of Status Desire	nd 🔲		Additional equired	
City & State			State				6. Election Campaign Finance	ng	\$5.00	May Be
23		28					Trust Fund Contribution			to Fees
Zφ	Country	Zip		Cou	intry	,	8. This corporation has liabili			. 199.032,
24	25 Name and Address of Cu	29		30	1		Florida Statutes 10. Name and Address of No.] No	
	R, SCOTT	Trent registered	Agent	 -	81	Name	IV. Name and Address of No	w negistered A	(gent	
	S. HWY. ONE									
SUITE 2				82	Street Add	Iress (P.O. Box Number is Not Acc	eptable)			
	EACH FL 33408			,	83					
•									1221 2	
					84	City		FL	85 Zip	Code
12. THLE D		AND DIRECTORS		18 Registere 13.		ent signature requ	ired when reinstating) ADDITIONS/CHANGES TO	DATE OFFICERS AND	DIRECTOR Change	RS IN 12
	reenhouse-tiano, cy 170 n.e. 18TH Avenue	'NTHIA		1.2 N 1.3 S		ADDRESS				
CITY-ST-ZIP FT	i. Lauderdale fl 3333	34		1.4 0	HTY-S	6T-ZIP				
TITLE			DELETE	2.1 TI	TLE				Change	Addition
NAME				2.2 N	AME					
						ADDRESS				
1014-21-745			DELETE	2. 4 C		ST-ZIP			Change	☐ Addition
NAME				3.1 N			,		Onango	L. Addition
STREET ADDRESS						ADDRESS				
CITY - ST - ZIP						ST-ZIP				
DILE			DELETE	4.1 Ti	TLE				Change	Addition
NAME				4.21	IAME					
STREET ADDRESS				4.3 S	TAEET	ADDRESS				
City-S1-ZiP				4.4 0	ITY-S	ST-ZIP				
TITLE			DELETE	5.1 T)					Change	Addition
NAME				5.2 N						
STREET ADDRESS				5.3 S	TREET	ADDRESS				
CITY-ST-ZIP			DELETE			ST-ZIP			Observe	A Jane
TITLE			DELETE	6.1 TI		}			Change	Addition
NAME				6.2 N						
STREET ADDRESS						ADDRESS		•		
DiTY+ST-ZIP				64 C	11 Y - S	ST-ZIP				

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: