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 # M92497

(0)

rporation Name

incipal Place of Business Mailing Address

Mailing Address

Mailing Address

FILED Jan 29 1997 8:00am Secretary of State

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Principal Prace of Business Mailing Address								4- 4	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,	
10471 S.W. 12 MIAMI FL 3312		10471 S.W. 126 STREET MIAMI FL 33176-4749									
							3. Date Incorporated or Qualified 08/03/1988	3a. Da	ite of L 06/19		port
2. Principal F	Place of Business	2	2a. Mailing Addres	s			4. FEI Number 65-0065639	<u>l</u>	F		olied For Applicable
Suite Apt	# etc	2	Suite, Apt. #, et	C.			5. Certificate of Status Desired				dditional
City & Stat	(6)		City & State				6. Election Campaign Financing		\$5	.00	May Be
23		2					Trust Fund Contribution				Fees
Ζφ			Zip Cou			1		n has liability for intangible tay under s. 199.032.			
24	25 29 9. Name and Address of Current Registered			ad Agent			Florida Statutes Yes V No 10. Name and Address of New Registered Agent				
ADI	OSS, FRANCES L.	iss of Current He	gistered Agent	 +	81	Name	10. Rathe and Address of New F	agister au	-Aeur		
104	71 S.W. 126 STREET				82		lress (P.O. Box Number is Not Accepta	ible)			
MA	MI FL 33176				83						
			•		84	City		FL	85	Zip C	ode
44 5		c - 607 0500	Loon aton the late		<u> </u>		6 - 5 - A-1				
office or lagent. La	registered agent, or both am familiar with, and acc						poration submits this statement for the ation's board of directors. I hereby acc lifed when reinstating)	DATE	ointme	ntas i	registerea
12,		FFICERS AND DIE		13.		and angular of the same	ADDITIONS/CHANGES TO OFF		DIRE	CTOR	S IN 12
THE	DP .		DELE		ITLE	7			Ch		Addition
NAME	GROSS, LESLIE JA	N	- A	1,2 N	AME	ŀ					
STREET ADDRESS	10471 S.W. 126 S	Г.		1,3\$	TREET	ADDRESS					
CITY - S1 - ZIP	MIAMI FL				ITY-S	ST-ZIP					
TITLE	D	_	☐ DELE	TE 217	ITLE				☐ Ch	ange	Addition .
NAME	GROSS, FRANCES			22 N	IAME						
STREET ADDRESS	10471 S.W. 126 S	l.		235	TREET	F ADDRESS					
CITY - \$1 - 7iP	MIAMI FL		T pro-			ST - ZIP			Lich		Addition
TITLE			DEŁE	1					[] Ch	arige	Addition
NAME STREET ADDRESS				32 N		T ADDRESS					
CITY-ST-ZIP	\					ST-ZIP					
TITLE			☐ DELE		_	91 £II			☐ Ch	ange	Addition
NAME				4, 21	NAME	-					
STREET ADDRESS				4.3 S	TREET	I ADDRESS					
CITY - ST - ZIP					ITY-S	ST-ZIP					
TITLE			DELE	TE 5.1 T	ITLE				Ch	ange	Addition Addition
NAME				5.2 N	IAME						
STREET ADDRESS				5.3 S	STREET	T ADDRESS					
C/TY-ST-ZIP						ST - ZIP			112		1 4 4 4 9 9
TITLE			DELE						L] Cr	ange	Addition
NAME				1	IAME						
STREET ADDRESS				6.3 S	TREE	T ADDRESS					

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 13 if block 13 if blanced or M an add chapter 607.

SIGNATURE:

TOTE AND TYPED CHAPTIFITED NAME OF SIGNING OFFICER OF DIRECT

SCIE JAY GROSS) PASS

123/47 30 5 - 735 13