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NONPROFIT **CORPORATION** ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

	IMENT # NOS192 DS OF THE JAPANESE GAR	• •		I HONYOL AN BOIR! AND INDIA HAIR	#181 8/8/1 8/8/1 8/8/1 8/8/1 8/8/1 8/8/1 8/8/1 8/8/1
Principal Plac	e of Business	Mailing Address			
C/O MS. AGNES YOUNGBLOOD AND LAKEVIEW DR. MIAMI BEACH FL 20140					
MiA				 Date Incorporated or Qualified 09/17/1984 	3a. Date of Last Report 02/14/1995
1688	Meridian Ane	2a. Mailing Address 26 16 88 Meri	J	4. FEI Number	Applied For
Suite, Apt.	#, etc.	26 1688 Merio	alan Artic	59-2616203	Not Applicable
2 1001		27 1001		5. Certificate of Status Desired	\$8.75 Additional
Oity & State	MI BEACH FL	City & State 28 MIAMI BE	ACH FL	Election Campaign Financing Trust Fund Contribution	Fee Required \$5.00 May Be
Zp 4 331		zip 29 33134	Country 30 Dade	8. This corporation has liability for in	Added to Fees stangible tax under s. 199,032, Yes No
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Re	gistered Agent
700 LAKE MIAMI BE	BLOOD, AGNES EVIEW DR. EACH FL 33140 To the provisions of Sections 617.0502 a	and 617 1508 Elevida Co. L	83 # 11. 84 City MIA	4 M J	FL 85 Zip Code 3 × 12.51
or register	to the provisions of Sections 617.0502 a red agent, or both, in the State of Florida	Such change was putterfer	3S. The above-named coro	Oration submite this statement for the	one of changing its late 1 10
rearranear with	in, and accept the poligations of, Section	n 617.0503, Florida Statutes.	ed by the corporation's bo	oration submits this statement for the purporard of directors. I hereby accept the appoin	ose of changing its registered offici ntment as registered agent. I am
BIGNATURE	Signature, typed or printed name of registered agent as	ri 617.0503, Florida Statutes. d title if applicable (NO)		та от что от в то то то до достори и не аррог	innent as registered agent. I am
BIGNATURE 3	Signature, typed or printed name of registered agent at OFFICERS AND	n 617.0503, Fiorida Statutes. d title if appicable (NO) DIRECTORS	TE Registered Agent signature required.	та от что от в то то то до достори и не аррог	DATE DATE
SIGNATURE	Signature, typed or printed name of registered agent a OFFICERS AND	ri 617.0503, Florida Statutes. d title if applicable (NO)	TE Registered Agent signature requir 13.	red without reinstating)	DATE DATE
SIGNATURE S 12. ITLE AME TREET ADDRESS	Signature: typed or printed name of registered agent a OFFICERS AND PD YOUNGBLOOD, AGNES 2333 BRICKELL AVE., #417	n 617.0503, Fiorida Statutes. d title if appicable (NO) DIRECTORS	TE Registered Agent signature requir 13. 11 Tifue 12 NAME 1.3 STREET ADDRESS	red without reinstating)	DATE ERS AND DIRECTORS IN 12
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SIGNATURE: SIGNATURE AND TPED OF PHINTED NAME OF SIGNING OFFICER OR DIRECTOR

March 7, 1996 365 538 2121