## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997 AMOUNT DUE ON OR BEFORE 9/17/97: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

**FILED** 

Aug 04 1997 8:00am

Secretary of State

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(8)

COMMIN	unites against hunw	AT EXPANSION, INC	).			 		
Principal Place of Business		Mailing Address						
SUSIE CLERMONT 4520 S.W. 30TH WAY FT. LAUDERDALE FL 33312		% SUSIE CLERMONT 4520 S.W. 30TH WAY FT. LAUDERDALE FL 33312				DO NOT WRITE IN TH	HIS SPACE	
		* ** *********************************				3. Date Incorporated or Qualified 3a 04/21/1987	Date of Last 05/01/19	
2. Principal Place of Business		2a. Mailing Address	2a. Mailing Address 26			4. FEI Number 65-0002011	<u> </u>	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75	Additional Required
City & State		City & State				Election Campaign Financing     Trust Fund Contribution		May Be to Fees
Zip <b>24</b>	25 29 30		<del> </del>	intry		8. This corporation owes or has paid the current year Personal Property Tax due June 30.		ntangible No
	9. Name and Address of Cur	rent Registered Agent		Е,		10. Name and Address of New Register	red Agent	<b>V</b>
	•		İ	81	Name			
4520 S.W	NT, SUSIE V. 30TH WAY		<b>82</b> St		Street Addre	ss (P.O. Box Number is Not Acceptable)		
FT. LAUD	DERDALE FL	•		83				
			ļ	64	City		┝┖╏	Code
I Office of r	to the provisions of Sections 617.0 registered agent, or both, in the Str im familiar with, and accept the ob-	ale of Florida. Such change	WAS AUTHORIZED	d by	the corporatio	oration submits this statement for the purpos on's board of directors. I hereby accept the	as of observing	its registered s registered
SIGNATURE			oo, i ionaa o.a.	10100	•			
	Signature, typed or printed name of registered			d Age	nt signature required			
12.		AND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS		
TITLE NAME	D IAV	☐ DELE	DELETE 1.1 TO				☐ Change	Addition
STREET ADDRESS	FIELD, JAY 4501 S.W. 30TH WAY		1.2 NA					
1	FT. LAUDERDALE FL	· · ·			ADDRESS			
CITY-ST-ZIP TITLE	D Pr. DAODERDALE FL		1.4 CITY - ST - ZIP TE 2.1 TITLE		T-ZIP		Change	1 Addition
NAME	(PAINTS API)		2.1 111 2.2 NA				Change	☐ Addition
STREET ADDRESS	4520 S.W. 24TH COURT				ADDRESS			
CITY-ST-ZIP	FT. LAUDERDALE FL		1					
TITLE	D DELETE 3.11		ITY-S TIF	1-211		Change	Addition	
NAME	MORDES, JERRY							L Auditon
STREET ADDRESS	4846 S.W. 26 TERR.				ADDRESS			
CITY-ST-ZIP	FT. LAUDERDALE FL		3.4. CI					
TITLE	D	☐ DELE1			1-211		Change	Addition
NAME	WINTERS, ANN	<del>_</del>	4.2 N/					
STREET ADDRESS	4531 SW 25TH TERR				ADDRESS			
CITY-ST-ZIP	FT. LAUDERDALE FL		4.4 CIT					
TITLE	, 1	DELET		_			Change	☐ Addition
NAME			5.2 NA					
STREET ADDRESS					address			
CITY-ST-ZIP			5.4 CIT		ı			
TITLE		DELET					Change	Addition
NAME			6.2 NA	ME			-	:
STREET ADDRESS			6.3 ST	AEET /	ADDRESS			
CITY-ST-ZIP			64 CIT	ry-st	- ZIP			

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address. -1/19/CA AUGUSTON O Worden Tande total (1)