## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT #

N22887

(6)

FILED
May 01 1996 8:00 am
Secretary of State

Principal Place of Business								B)
Principal Place of Business Mailing Address							IBDI ALDII ALBII BIBIL A	DIN BUDIN DUDIN UDDI
44 WEST FLAGLER STREET SUITE 750 MIAMI FL 33130 US		44 WEST FLAGLER STREET SUITE 750 MIAMI FL 33130		Date Incorporated or Qualified	3a. Date of Las	l Benort		
		US				10/07/1987	03/01/	
2. Principal Place of Business 2a.		. Mailing Address				CE OOOEOO?		Applied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.						Not Applicable
22		1				Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State 28		City & State				Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip Country		Zip Count y			8. This corporation has liability for in	poration has liability for intangible tax under s. 199.032,		
24 25 29 30  9. Name and Address of Current Registered Agent							Yes No	
5. Ivality Bile	- modicas of Culterit Regi	ololeu Ayelli		81 Nan	ne	10. Name and Address of New Re	gistered Agent	
MILOTON DIOLIADO	2 500							
MILSTEIN, RICHARD C ESQ 801 BRICKELL AVENUE 24TH FLOOR				82 Street A(L)		ে (P.O. Box Number is Not Acceptable	)	
MIAMI FL 33131	JE 24111 FLOUR		<u> </u>	83				
MINIMITE GOTOT							*****	
				84 City			F1 85 2	'ip Code
<ol> <li>Pursuant to the provisions or registered agent, or both familiar with, and accept the</li> </ol>	of Sections 617,0502 and 6 n, in the State of Floridal Suc el obligations of, Section 617	17.1508, Florida Statut d: change was authoriz 7.0503, Florida Statutes	es, the aboved by the c	e named orporation	Lcorpora n's board	ition submits this statement for the purp If of directors. Thereby accept the appoin	ose of changing its ntment as registere	registered office d agent. I am
SIGNATURE								
Signature, lyped or prin 12.	of the eat registered agent and the of	rappliable (NO	Dir Begestendi ■ 13.		re responsed	where Ferry land and the state of the state	DATE	
TOLE D	OF TOURS AND DINE	DELETE	11 10		. 1	ADDITIONS/CHANGES TO OFFIC		
NAME GIEVERS, I	VADEN A	LJoeccie	1.2 NA				Change	Addition
STREET ADDRESS 44 W. FLA				rit Hel I Adores	20			
CITY-S1-ZIP MIAMI FL				Y - S* - ZIP	33			
THE S/TR	<u> </u>	DELETE	2111				Change	Addit on
NAME MILSTEIN,	RICHARD		2 2 NA				L orange	L. J Addit on
				··· Ref i addres	10			
CITY-ST-ZIP MIAM! FL			1	TY SI-ZIP	"			
TITLE PVD		DELETE	3 1 TiT				Change	Addition
	, ervin a.	•	3.2 NA	Μέ				
STREET ADDRESS 100 S BISCAYNE BLVD #900			3351	KELL ADDRES	is			
CITY-ST-ZIP MIAMI FL			3.4 CI	Y S1 - ZIF				
TITLE		DELETE	417[	_E			☐ Change	☐ Addition
NAME			4 2 NA	M:				
STREET ADDRESS			4 3 ST	SELL ADDRES	is			
CITY-ST-ZIP	···	· ————	4 4 CIT	Y - ST - 71P				
TITLE		☐ DELET <b>E</b>	5 1 TITI	. <b>E</b>			☐ Change	Add-tion
NAME			5 2 NAI	ИE				
STREET ADDRESS			53 ST	EFT ADDRES	SS			
CITY-S1-ZIP				Y - ST - ZIP				
TITLE		DELFTE	6 1 1111	. <b>F</b>			Change	☐ Addition
NAME			6.2 NA	ΛE				
STREET ADDRESS			63 STF	EFF ADDRES	is			
CITY ST-ZIP  14. I do hereby certify that the	information purpolied with the	films in red into the 4		Y-SI Z-P				

4. I do hereby certify that the information supplied with this filting is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report is properly provided in the same legal effect as if made under cath, 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 changes, or or an attagement with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytine Priore #