5-13-97 B 7140 C FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # No. Corporation Name

1997

N34558

(9)

FILED May 13 1997 8:00am Secretary of State

Address 34 SW FIFTH AVENUE HOMESTEAD FL 33034 3. Date Incorporated or Q 10/05/1989 2. Principal Place of Business 21 22 3. Mailing Address 24. FEI Number 65-0192103 Suite, Apt. #, etc. 25 City & State 26 State 27 City & State 28 FLORIDA CITY FL 68 Election Campaign Fine Trust Fund Contribution	Sired \$8.75 Additional Fee Required ancing \$5.00 May Be Added to Fees Addition for Intangible tax under s. 199.032, Yes No
HOMESTEAD FL 33034 MIAMI FL 33157-5941 2. Principal Place of Business 2a. Mailing Address 2b. Suite, Apt. #, etc. Suite, Apt. #, etc. City & State 23 FLORIDA CITY FL 28 FLORIDA CITY FL 29 33034 29 Country 29 33034 9. Name and Address of Current Registered Agent MIAMI FL 33157-5941 3. Date Incorporated or Q 10/05/1989 4. FEI Number 65-0192103 5. Certificate of Status De City & State 27 Country 28 FLORIDA CITY FL 29 33034 10. Name and Address of Current Registered Agent 81 Name	Sired \$8.75 Additional Fee Required ancing \$5.00 May Be Added to Fees Addition for Intangible tax under s. 199.032, Yes No
2. Principal Place of Business 2. Mailing Address 2. Suite, Apt. #, etc. 2. Suite, Apt. #, etc. 2. City & State 2. The Country FL 28 FLORIDA CITY FL 28 FLORIDA CITY FL 25 29 33034 30 DADE 2. Principal Place of Business 2. Mailing Address 3. FLORIDA CITY FL 5. Certificate of Status De 5. Certificate of Status De 6. Election Campaign Fina Trust Fund Contribution Trust Fund Contribution Page 1. This corporation has lia Florida Statutes 3. PLORIDA CITY FL 28 FLORIDA CITY FL 5. This corporation has lia Florida Statutes 3. PLORIDA CITY FL 6. Election Campaign Fina Trust Fund Contribution Trust Fund Contribution Page 1. Name and Address of Current Registered Agent 10. Name Address Of Current Registered A	Sired \$8.75 Additional Fee Required ancing \$5.00 May Be Added to Fees Addition for Intangible tax under s. 199.032, Yes No
21 26 34 3W FIFTH AVENUE 65-0192103 Suite, Apt. #, etc. 22 27 5. Certificate of Status De City & State City & State City & State City & State 23 FLORIDA CITY FL Zip Country Zip Country 24 25 29 33034 30 DADE 9. Name and Address of Current Registered Agent 81 Name	Not Applicable \$8.75 Additional Fee Required ancing \$5.00 May Be Added to Fees ability for intangible tax under s. 199.032, Yes No
Suite, Apt. #, etc. Suite, Apt. #, etc. City & State Country Zip Name and Address of Current Registered Agent Name	sired \$8.75 Additional Fee Required sancing \$5.00 May Be Added to Fees shillity for intangible tax under s. 199.032, Yes \$\infty\$ No
22 City & State City & State 23 FLORIDA CITY FL 28 FLORIDA CITY FL 29 33034 29 Country 29 33034 30 DADE 10 Name and Address of Current Registered Agent 10 Name and Address of Current Registered Agent	Fee Required ancing \$5.00 May Be Added to Fees ability for intangible tax under s. 199.032, Yes No
City & State 23 FLORIDA CITY FL 28 FLORIDA CITY FL Trust Fund Contribution 24 Country 25 29 33034 30 DADE 9. Name and Address of Current Registered Agent 6. Election Campaign Fina Trust Fund Contribution 8. This corporation has lia Florida Statutes 10. Name and Address of Current Registered Agent	Added to Fees ability for Intangible tax under s. 199.032, Yes No
Zip Country Zip Country 24 25 29 33034 30 DADE Fiorida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of Statutes 81 Name	ability for Intangible tax under s. 199.032,
24 25 29 33034 30 DADE Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of 81 Name	Yes 🔀 No
9. Name and Address of Current Registered Agent 10. Name and Address of 81 Name	
POUL OR VINANI	
POULOS VIVIAN 82 Street Address (P.O. Box Number is Not A	
	Acceptable)
9151 SW 181 TERR	
MIAMI FL 33157	i
84 City	FL 85 Zip Code
11. Purcuant to the provisions of Sections 617 0502 and 617 1508. Finding Statutes, the shows named correction submits this statement	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Fiorida Statutes, the above-named corporation submits this statement office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I here agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.	by accept the appointment as registered
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent eignature required when reinstating)	DATE
	TO OFFICERS AND DIRECTORS IN 12
TITLE P DELETE 1.1 TITLE DT	☐ Change 🔀 Addition
NAME PATES, MARGARTE DR 1/2 NAME MASON H. VAN T	
STREET ADDRESS 622 N. KROME AVE. 1.3 STREET ADDRESS 16940 5W 302 1	
	Change Addition
NAME HARTZLER, KATHLEEN 2.2 NAME	Onlings Notinon
STREET ADDRESS 1560 N.E. 11 ST. 2.3 STREET ADDRESS	
CITY-S1-ZIP HOMESTEAD FL 33030 2.4 CITY-S1-ZIP	•
TITLE T DELETE 3.1 TITLE	Change Addition
NAME POULOS, VIVIAN 32 NAME	
STREET ADDRESS 9451 S.W. 181 TERR. 3.3 STREET ADDRESS	,
CHY-ST-ZIP MIAMI FL 33157 3.4 CHY-ST-ZIP	<u> </u>
TITLE DS DELETE 4.1 TITLE	Change Maddition
NAME FULMER, CHRIS 4.2 NAME	
STREET ADDRESS 22195 S.W. 252 ST. 4.3 STREET ADDRESS	3
DITY-ST-ZIP HOMESTEAD FL 4.4 CITY-ST-ZIP TITLE D DELETE 5.1 TITLE	Change Addition
NAME LEANARD, RESECCA 5.1 TITLE 5.2 NAME	Find Amarika - Find Amarika
STREET ADDRESS 10730 S.W. 163 ST. 5.3 STREET ADDRESS	
CITY-ST-ZIP MIAMI FL 33157 54 CITY-ST-ZIP	
TITLE D DELETE 61 TITLE DP	Change
NAME MONTESINA, BECKY 62 NAME	
STREET ADDRESS 15945 SW 77 CT 6.3 STREET ADDRESS	
CITY_S1_ZIP MIAMI FL 14. I do horeby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florid	

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 dijector 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 13 or Block 13 of changed, or on an attachment with an address.

SIGNATURE MASSIVITY VAN TASSEL

4/24/97 Date 305-246-5/4/

172EUS/ (3/36