SECOND NO	TICE: CORPORATION OF BEFORE 9/17/97:	ON WILL BE DISS \$61.25 (IF DISSOLV	SOLVED ON OR AF	TER SEPTI	EM R 17, 17, 18 ATE: \$2	1 997 36.25).	-	ILEI	_		
NO CORI ANNU	NPROFIT PORATION AL REPORT		FLORIDA Sai	DEPARTMENT OF SECRETARY OF CORP	NT STATE	<u>·</u>	Sep 05 1 Secret				
DOCUN 1. Corporation UNION	MENT # N		005867	(5)							
Principal Place of Business Mailing Address							- I Marina dia mana any aona aona aona aona aona aona ao				
2727 SOUTH PARK ROAD 2727 SOUTH PARK ROAD HALLANDALE FL 33009 HALLANDALE FL 33009							DO NOT WRITE IN THIS SPACE 8. Date Incorporated or Qualified 3s. Date of Last Report				
2 Principal Pl	ace of Business		2a. Mailing Addre	SS			12/11/1995 4. FEI Number		<u>3/15/19</u>	96	
21 14105	NW 58th COU	RT	26 14105 N Suite, Apt. #, 6	W 58th	CURT		65-0650817	<u></u>		pplied For ot Applicable	
Sulte, Apt. (27				5. Certificate of Status Desired			Additional equired	
City & State 23 MIAMI	•		City & State 28 MIAMI L	AKES,	F.		6. Election Campalan Financina Trust Fund Contribution		Added	to Fees	
Zip 24 33014	25 I	ntry DADE	Zip 29 33014	30	Country DADE	}	 This corporation owes or has Personal Property Tax due Ju 			tangible	
2727 S. F HALLAND 11. Pursuant I office or re agent. I as	OALE FL 33009	ections 617.0502 e oth, in the State of ocept the obligatio SKTND	ind 617.1508, Florid Florida, Such chang ins of, Section 617.0	a Statutes, ti ge was autho 1503, Florida	83 84 City	Address 280	SKIND, HOWARD (P.O. Box Number is Not Accept 1 PONCE DE LEON BO AL GABLES ation submits this statement for the s board of directors. I hereby acc	FL purpose of c	85 Zip (Code 134 s registered registered	
	Signature, typed or printed n	OFFICERS AND [(NOTE E	istereo Agent signatur 13.	v beriup v	then reinstating) ADDITIONS/CHANGES TO OFF	15			
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	C/D WILDS, RANDAL 2727 SOUTH PA HALLANDALE FI	l d IRK Rd.	DEI	LETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 OTY-ST-ZIP	141			Change	L Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VC/D CANNESTRO, TO 2727 SOUTH PA HALLANDALE FI	rk RD.	□ DEI		2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP				Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VC/D LINDSTROM, JO 2727 SOUTH PA HALLANDALE FI	irk RD.	K .] DE		3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. QITY-ST-ZIP	27	D RGE GARBARINO WEST SUNRISE BOULE LAUDERDALE FL 333		Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/D RICHARDVILLE, 2727 SOUTH PA HALLANDALE FI	rk RD.	[DE	LETE	4.1 TITLE 4. 2 NAME 4.3 STREET ADDRESS 4.4 (ITY-ST-ZIP] Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T/D Lareau, Dave 2727 South Pa Hallandale Fi	ARK RD.	K] DEI	LETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 (ITY-ST-ZIP	203	EY MCDOUGALL 75 NE 15th COURT TH MIAMI FL 33179	<u>X</u>	Change	l noillbbA	
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DEI	LETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP				Change	Addition	
44 Ldo berel	on Indicated on this a fficer or director of th in Block 12 or Block	nnual repert or sup a corporation or in 3 if changed, or o	plementat annual re e receiver or truetee n an attacht ent witi	port is true a empowered h an address	r the exemption s and accurate and to execute this s.	that my report as	Section 119.07(3)(i), Florida Statu signature shall have the same let required by Chapter 617, Florida	gal effect as if Statutes; and	made und that my n	der oath; that iame	

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