FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DIVISION OF DOCUMENT # P9200006359 (3)

A. SERCHAY ACCOUNTING SERVICES, P.A.

FILED May 12 1997 8:00am Secretary of State



\$310 NW 33 AVE STE 100 SUITE 110 FT LAUDERDALE FL 33309 US 2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country		5310 NW 33 AVE STE 100 SUITE 110 FT LAUDERDALE FL 33309-6319 US 28. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country				3. Date Incorporated or Qualified 11/16/1992 4. FET Number 65-0374670 5. Certificate of Status Desired 6. Election Campaign Financing Trust Fund Contribution 8. This corporation has liability for in	05/01/1996 Applied For Not Applicable \$8.75 Additional Foe Required \$5.00 May Bo Added to Fees r intangible tax under s. 199.032,		
24 0 Ner	25 29 30 9. Name and Address of Current Registered Agent		 _		Florida Statutes See No 10. Name and Address of New Registered Agent				
SERCHAY, ALLAN 5310 NW 33 AVE STE 200 17 C FT LAUDERDALE FL 33309					Name Street Add	riie eet Address (P.O. Box Number is Not Acceptable)			
Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agont, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. Signature required when reinstating DATE.									
12.	OFFICERS AND		NELECT TO THE	13.		ADDITIONS/CHANGES TO OFFICE			
STREET ADDRESS 5310 1	iay, allan IW 33 ave ste 1 1 0 Iderdale fl		DELETE	1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY - S	ĭ] Change	
TITLE NAME STREET ADDRESS CITY-S1-ZIP			DELETE	2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S	1		L] Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DELFIE	3.1 TITLE 3.2 NAME 3.3 STREET 3.4. CHY-5			<u>.</u>) Change	Addition
TITLE NAME STREET ADDRESS CITY-SI-ZIP			DELETE	4.1 TITLE 4 2 NAME 4.3 STREET 4.4 CITY-S	ADDRESS		Ľ	Change	Addition
TITLE NAME STREET ADORESS CITY-S1-ZIP			DELETE	5.1 TITLE 5.2 NAME 5.3 STREET 5.4 CITY-S	AODRESS			Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DELETE	6.1 TITLE 6.2 NAME 6.3 STREET 6.4 CITY-S	ADDRESS			Change	Addition

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.