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

FILED Apr 11 1997 8:00am Secretary of State

DOCUN 1. Corporation	MENT # P93	ODOOOIS RISTIAN MASS	oq E INC.			
- 16v		Mailing Addres				
Principal Place		Malling Addres	S			
POMPAI	SE 14 ST. NO BCH.	SAME	3			
FL.330	062					
• Or assess Dis	ace of Business	2a. Mailing Add	iress	***	- ,	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition I Change Addition Change Addition The Change Addition Addition Section 119.07(3)(1), Florida Statutes, I further certify that the
<u>2.</u> 21	Rice Co. Co. Co. Co. Co.	26				Taphias is
Suite, Apl. ≇	e, e;c	~~~~~~~~~~~~ ~~~~~~~~~~~~~~~~~~	Suite, Apt. #, etc.			- \$8.75 Additional
22		27				6. Certificate of Status Desired Fee Required
City & State		City & State				
Zip	Country	Zip	 	ountry	ı	
24	25	29 Current Registered Agent	30	7		
	9. Name and Address of	Current Registered Agent	···_	B1	Name	10. Name and Address of New Pagistered Agent
	CHRISTIAN MA	SSE				Provide Control of the Control of th
	2634 SE 14 S			82	Street Att	foress (P.O. Box Number is Not Acceptable)
	POMPANO BCH.			83		
•	FL.33062			84	City	85 Zio Code
						<u> </u>
SIGNATURE	il farmt är wildti, and accept the	ne obligations of Section 607				
12.	OFFIC	ERS AND DIRECTORS	1			
	PRESIDENT	-		THLE	ļ	Change L Addition
	CHRISTIAN MA			Z NAME	ADDRESS	
	2634 SE 14 S		i i	CITY-S		
	POMPANO BCH. DIRECTOR	FL 33062		TITLE	-	Change Additi
NAM:	CHRISTIAN MA	SSE	2	2 NAME	ļ	
STREET ADDRESS.	2634 SE 14 S	? 'l '	2:	STREET	ADDRESS	
OUY 81 39	POMPANO BCH.			4 CITY -	T-ZIP	
Mrs.	SECRETARY		1	TITLE	ļ	L_J Change L_J Additi
NAME	CHRISTIAN MA 2634 SE 14 S	SOE T		2 NAME	ADDRESS	
STREET ASSORESS	POMPANO BCH		1 -	3 STREET 4. CITY~!	1	
100 St 769				1 TITLE	31.11	☐ Change ☐ Additi
NAM:		<u></u> -		2 NAME	-	· · · · · · · · · · · · · · · · · · ·
STEEL AFORESS			4:	STREET	ADDRESS	
(atv. 51, 71)				CITY-S	iT - ZIP	
111.6				1 TITLE	{ _	☐ Changa ☐ ☐ Addit
NAM*				2 NAME		<i>ል</i> ሴ ብ
STREET AT THE P.					ADDRESS	ווואמו
DIY 51 45				4 CITY-5 1 TITLE	51 - ZIP	Channe L Addut
NAME		LJ 1		2 NAME	{	600002141366°°°°°
Shelf Milher		1			ADDRESS	-04/14/9701003027
ODV 51 70		1	6.	4 CHY- S	31 - ZIP	***165.UU
14. Too hereb			s not qualify for t	he exe	mption stat	ted in Section 119.07(3)(i). Florida Statutes. I further certify that the
nrafniat di Lam an Afr appeats in	r in advance on this annual re- ricer or director of the corpo i Block 12 or Block 13 if gra	poil or supplemental annual ration or the receiver or trust nged, or on an attachment v	report is true an ee empowered t vith an address.	o exec	oute this rep	hat my signature shall have the same legal effect as it made under oath, to port as required by Chapter 607, Florida Statutes; and that my name