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PROFIT CORPORATION ANNUAL REPORT

1997



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9300012906 (2)

2. Principal Place of Business 2. Mailing Address 2. Mailing Address 2. Suite, Apt. #, etc. 2. Suite, Apt. #, etc. 2. City & State 2. City & State 2. Country 3. Mame and Address of Current Registered Agent 3. Name 3. Name 3. Name 4. FEI Number 6. Certificate of Status Desired 3. Trust Fund Contribution 3. Trust Fund Contribution 4. FEI Number 6. Certificate of Status Desired 5. Certificate of Status Desired 5. Certificate of Status Desired 6. Election Campaign Financing Trust Fund Contribution 5. Trust Fund Contribution 5. Trust Fund Contribution 6. This corporation has liability for intensity Florida Statutes 6. Point Statutes 6. This corporation has liability for intensity Florida Statutes 6. This corporation has liability for intensity Florida Statutes 6. This corporation of the statutes 6. This corporation has liability for intensity Florida Statutes 6. This corporation is Statutes 6. This corpo	Place of Business DIXIE HWY 33156-5236	Mailing Address 12265 S. DIXIE HWY SUITE 957 MIAMI FL 33156-5260			
2 Principal Place of Business 2a. Making Address 4. FEL Number 55-0392360					3a. Date of Last Report 04/30/1996
Suite, Apt. #, etc. Suite, Apt. #, etc.	pal Place of Business	2a. Mailing Address			Applied For
Suite. Apt. #, etc. City & State Country April Country Ball Name 10. Name and Address of New Megistered 10. Name and Address of				65-0392360	Not Applicab
City & State 28	Apl. #, etc.			5. Certificate of Status Desired	\$8.75 Additional
Trust Fund Contribution	State			6 Floation Compains Financias	Fee Required
Zip Country Zip Country 2					\$5.00 May Be Added to Fees
Page	Country		Country	8. This corporation has liability for in	yangible tax under s. 199.032,
JULIEN, JOHN P 12265 \$. DIXIE HWY SUITE 957 MIAMI FL 33156-5236 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose office or registered eigent, or both, in the State of Florida, Such change, was puriorized by the corporation's board of directors. I hereby accept the agreement from laminar with, and accept the obligations of, Section 607.0505, Florida Statutes. 12. OF FICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND TIME 14. OFFICERS AND DIRECTORS 15. STREET ADDRESS 15. WIAMI FL 15. ST 16. ST 17. ST VICTOR-JULIEN, LOURDES C 17. ST VICTOR-JULIEN,			30	Florida Statutes	Yes 🗌 No
SUCHA JULIEN, JOHN P 12285 S. DIXIE HWY SUTTE 957 MIAMI FL 33156-5238 82 Street Address (P.O. Box Number is Not Acceptable) 83 B4 City F1 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose 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 against an amaliar with an adacept the obligations of, Section 607.6055, Florida Statutes. SIGNATURE Signature, typed or protect registered agent, and accept the obligations of, Section 607.605, Florida Statutes. SIGNATURE DITTLE OF FICE RS AND DIRIC CTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRIC CTORS 13. THE 12. NAME 12. ADDITIONS/CHANGES TO OFFICERS AND DIRIC CTORS MARI FL 12. NAME 12. ST VICTOR-JULIEN, LOURDES C 12. NAME STREET ADDRESS DITY-ST-2P MIARI FL DILETE 12. THE 12. ADDITIONS/CHANGES TO OFFICERS AND DIRIC CTORS 32. SIRRET ADDRESS DITY-ST-2P MIARI FL 12. ADDITIONS/CHANGES TO OFFICERS AND DIRIC CTORS 33. SIRRET ADDRESS DITY-ST-2P ITTLE MARI ST VICTOR-JULIEN, LOURDES C 12. NAME 32. SIRRET ADDRESS DITY-ST-2P TITLE MARI STREET ADDRESS DITY-ST-2P TITLE MARI ST VICTOR-JULIEN, LOURDES C 13. SIRRET ADDRESS DITY-ST-2P TITLE MARI ST VICTOR-JULIEN, LOURDES C 14. City 15. THE 15. THE 16. THE 16. THE 17. THE 18. THE 1		rrent Registered Agent	R1 Namo	10. Name and Address of New Reg	gistered Agent
SUITE 957 MIAMI FL 33156-5236 83 84 City FI 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above named corporation submits this statement for the purpose office or registered agent, or both, in the State of Florida. Such change was purliorized by the corporation's ubmits this statement for the purpose office or registered agent, or both, in the State of Florida. Such change was purliorized by the corporation's ubmits this statement for the purpose of t					
MIAMI FL 33158-5238 83			82 Street Add	fress (P.O. Box Number is Not Acceptable	le)
11. Pursuant to the provisions of Sections 607,0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose office or registered agent, or both, in the State of Florida Statutes, the above-named corporation's board of directors. Thereby accept the agent of the purpose agent, I am familiar with, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE Signature typed or printed name of tegritand application. (NOTE Registrined Agent's gradure required when remaining) DATE 12. OFFICERS AND DIRECTORS STREET ADDRESS OITY-ST-2IP MIART FL DILETE 1.1 TITLE ST DILETE 2.1 TITLE ST UCTOR-JULIEN, LOURDES C 12205 S DIXIE HWY / STE 957 MIART FL DILETE DILETE 3.3 SIRRET ADDRESS OITY-ST-2IP MIART FL DILETE 3.1 TITLE 3.2 SIRRET ADDRESS OITY-ST-2IP DILETE 4.1 TITLE 4.2 NAME 3.3 SIRRET ADDRESS OITY-ST-2IP TITLE AMME 4.3 SIRRET ADDRESS OITY-ST-2IP TITLE AMME 4.4 City (NOTE Registrined Agent's gradure required when remaining) DATE 1.2 NAME 1.3 SIRRET ADDRESS 1.3 SIRRET ADDRESS 1.4 City-ST-2IP DILETE 2.7 TITLE 3.7 TITLE 4.4 City-ST-2IP DILETE 3.7 TITLE 3.7 TITLE 4.4 City-ST-2IP DILETE 3.7 TITLE 4.4 City-ST-2IP DILETE 3.7 TITLE 3.7 TITLE 4.4 City-ST-2IP DILETE 3.7 TITLE 4.4 City-ST-2IP DILETE 3.7 TITLE 4.4 City-ST-2IP DILETE 3.7 TITLE 3.7			83		
TITLE PUBLIEN TO THE PROPERTY OF THE PROPERTY			84 City		85 Zip Code
SIGNATURE Signature: typed or printed name of registered signature to tile (1 applicable). NOTE Registered Agent as granture required when remaisleight DATT			1.1.7		
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STREET ADDRESS 63 STREET ADDRESS	FSS		■ i		

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 eath; 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 160; change 0, or on applicachment with an address.

FILED

Apr 21 1997 8:00am

Secretary of State