FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

	1996	
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DOCUMENT #

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	NORTH MIAN	II BEACH FL 3	33162		NORTH MIAMI BE	ACH FL 331	62			Date Incorporated or Qualified	3a. Date of L	act Rooat	
										03/18/1993	1	7/1995	
2.	Principal Pia	ce of Busines	\$	2a	. Mailing Address					4. FEI Number	UL/ I	Applied For	
21				26						65-0400948		Not Applicabl	
en.	Suite, Apt. #	, etc.			Suite, Apt. #, etc	D				5. Certificate of Status Desired	\$(8.75 Additional	
22	O4 : 9 O4 1-	· · · · · · · · · · · · · · · · · · ·		27						OF GENERAL OF CHARGE DESIRED		Fee Required	
23	Orty & State				City & State					6. Election Campaign Financing		5.00 May Be	
23]		· · · · · · · · · · · · · · · · · · ·	Country	28	Zip		'ouote.			Trust Fund Contribution		Added to Fees	
24	• 1	25	i	29	2.40	30	country			8. This corporation has liability for Florida Statutes Yes		ders 199.032,	
. 1			nd Address of Curre		tered Agent	[50]	7			10. Name and Address of New F		ıt	_
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	PERLOW	, JEFFREY	М				82	C+,	not Addre	ess (P.O. Box Number is Not Acceptab			
	1820 E I	HALLANDAL	E BEACH BLVD				J.	3"	oct Addit	555 (F.O. DOX NUMBERS NOT ACCEPTAL	ne)		
	HALLAN	DALE FL 33	009				83						
							84	Cit			- 85	Zip Code	
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11	or registere	o the provision od agent, or bo	is of Sections 607.050; oth, in the State of Flor	2 and 60 ⊮da. Suct	7.1508, Florida St a change was auth	atutes, the a norized by th	bove-n e corpa	name oratio	d corpora on's board	ation submits this statement for the pure d of directors. I hereby accept the app	pose of changing	its registered office	æ
	familiar with	i, and accept	the obligations of, Sec	tion 6 07.	.0505, Florida Stat	utes.				a constant who copy accept this upp	ommone as regis	Refect agent. Fair	
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	r - \$1 - ZIP		BEACH FL			14	CITY - S	T-ZIP					
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STR	ELL AUGRESS		73RD TER			4.3	STREET	ADDRE	ss				
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	r - S1 - ZIP						CITY-ST		.00				
	. I do hereby	cedify that the	e information supplied	with this	filing is voluntarily	furnished on	d done	not	qualify for	r the exemption stated in Section 119.	07(3)(k), Florida S	Statutes. I further	_
	oath; that I	am an officer i		uai repor oration or	t or supplemental r the receiver or to	annuai repor ustee empov				r the exemption stated in Section 1192, e and that my signature shalf have the report as required by Chapter 607, Fig.			

SIGNATURE:

California de AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR / 22 2016/96 305-932-7572