SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.

AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P93000027289 (6)

CYNTHIA PERRY ENTERPRISES INC.

FILED Jun 02 1997 8:00am Secretary of State

	THAT ENTERN THOLO,					
Principal Plac	e of Business	Mailing Address				
1010 S. 28TH AVENUE HOLLYWOOD FL 33020 US		101P S. 28TH AVENUE HOLLYWOOD FL 33020 US				
					 Date Incorporated or Qualified 04/12/1993 	3a. Date of Last Report 0 8/31/19 95 7/3//
	lace of Business	2a. Mailing Address			4, FEI Number	Applied For
21 /0/1	05.284 AVE	26	26		65-0402791	Not Applicable
	Mywood Fl	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State 23 3 2	20	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 24	Country 25 U.S	Zip 29	Countr	у	This corporation has flability for Florida Statutes	
	9. Name and Address of Curre		1341		10. Name and Address of New R	
DI	EDDY CYNTHIA D		81	Namo		
PERRY, CYNTHIA D 1010 S. 28TH AVE.			82	Street Ad	ddress (P.O. Box Number is Not Acceptable)	
	OLLYWOOD FL 33020		83			**************************************
	_		L			
	•		84	City		FI 85 Zip Code
office or to	to the provisions of Sections 607.050 agistered agent, or both, in the State in familiar with, and accept the oblig	eol Florida. Such change was a	authorized by	the corpora	rporation submits this statement for the pation's board of directors. I hereby accep	purpose of changing its registered
SIGNATURE	The terminal trial, and accept the cong	ations of Scotlon 607.0005, 1 to	onda otatole.	,		
	Signature, typed or printed name of registered ag-		16: ମନ୍ତୋstored Aç	ent signature rec	quired when reinstating)	DATE
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFI	
TITLE	D	DELETE 1.1 TI				Change Addition
NAME OTOUT ADDRESS	PERRY, CYNTHIA D		1.2 NAME			İ
STREET ADDRESS	1010 S. 28TH AVE.		- I	T ADDRESS		
CITY-ST-ZIP TITLE	HOLLYWOOD FL 33020	DELETE	1.4 CITY - 2 1 TITLE	ST-ZIP		Change I talyitas
NAME	— 1 · ·		22 NAME	1		Change Addition
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP			2.4 CITY-			
TITLE		DELETE	3.1 1(TLE	21.51		Change Addition
NAME .			3.2 NAME	1		
STREET ADDRESS				T ADDRESS		·
CITY-ST-ZIP			3.4. CITY-	1		
TITLE		DELETE	4.1 TITLE			Change Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREE	T ADDRESS		
CITY - ST- ZIP			4.4 CITY -	ST - ZIP		
TITLE		DELETE	5.1 TITLE		10000220	Change Addition
NAME			5.2 NAME		10000220 -06/11/97010	52019
STREET ADDRESS			53STREE	1 ADDRESS	***165.00	
CITY+\$1-ZIP			5.4 CITY -	ST - ZIP		
TITLE		DELETE	6.1 TillE		·	Change Addition
NAME			6.2 NAME			$ ho_{\mathcal{E}}$
STREET ADDRESS			6.3 STREE	T ADDRESS		ا م
CHY-ST-ZIP			GACITY-	CT. 7/D		6~6~1

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed as on an attachment with an address.

SIGNATURE: (

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