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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Apr 14 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P93000030521 (7)

STREET ADDRESS

CITY-ST-ZIP

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Principal Place of Business Mailing Address									## # #				
BS8 E DANIA BEACH BLVD DANIA FL 33004 DANIA FL 33004 DANIA FL 33004-3028													
1								3. Date incorporated or Qual 04/27/1993		Date of La 14/02/198		eport	
2. Principal Place of Business 21				2a. Mailing Address 26				4. FEI Number 65-0432730		Applied For Not Applicable			
Suile, Apt. #, etc. 22				Suite, Apt. #, etc.				5. Certificate of Status Desire	d 🗀	\$8.75 Additional Fee Required			
City & State				City & State				Election Campaign Financi Trust Fund Contribution					
Zip 24		Country 25	29	Zip	30	Country	<i>-</i>	This corporation has liabilit Florida Statutes	Yes	□ No	ler s.	199.032,	
1 410		and Address of Curre	nt Regist	ered Agent		81	I-7.	10. Name and Address of Ne	w Register	ed Agent			
LAWRENCE, LANA 358 E DANIA BEACH BLVD DANIA FL 33004						82	Name Street Ad	Address (P.O. Box Number is Not Acceptable)					
						City			-L 85	Zip C	ode		
11. Pursuant office or agent. I a	to the provisi- registered ag- am to mar wit	ons of Sections 607.00 ent, or both, in the Stat th, and accept the obli	gayons or,	Section 607.0505, FIG	วาตล	e abov rized by Statute	I e-named co y the corpor	prporation submits this statement for ation's board of directors. I hereby			ng its	registered egistered	
SIGNATURE	TOUR!	or printed name of registered a	LANK god and title if	g LAWNUNC Bylicable Pacs (NOT	C	TIM:	4141	quied when re ostating)	DATI				
12.	<u> </u>	ÖFFICERS A	AD DIBLC.	TORS (13.		ADDITIONS/CHANGES TO	OFFICERS A	AND DIREC			
TIȚLE NAME	LAWRENC	E. LANA		ם טוננונ		1.1 TITLE 1.2 NAME				[] Cila	nge	Addition	
STREET ADDRESS		NIA BEACH BLVD					ADDRESS						
CITY-ST-ZIP	DANIA FL	33004			- 1	1.4 CHY-S	- 1						
TITLE				DELETE		2.1 111LE	1			Cha	nge	Addition	
NAME						2.2 NAMÉ	1						
STREET ADDRESS						2 3 STREET	ADDRESS						
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NAME				•	- 6	4. 2 NAME	{						
STREET ADDRESS							ADDRESS						
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NAME					1	5 2 NAME	[
STREET ADDRESS						5.3 STRCE1	ADDRESS						
CITY-ST-ZIP	[_[5.4 CITY - S	31 - ZIP					·	
TITLE				DELETE		6.1 TITLE	1			Chai	nge	Addition	
NAME	1				- 1	5.2 NAME	1						

14. To horeby 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 15 or Block 16 or Block 17 or Block -10/97 954 898 213L

63 STREET ADDRESS