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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B, Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # P93000037764 (6)

1. P. S., INC. Principal Place of Business C/O ROBERT L. FELDMAN ESP 300 SEVILLA AVENUE #305 CORAL GABLES FL 33134 Mailing Address C/O ROBERT L. FELDM 300 SEVILLA AVENUE #305 CORAL GABLES FL 33134 CORAL GABLES FL 33134									
US		U\$				 Date Incorporated or Qualifity 05/25/1993 	ed 3a. D 07/	ate of Last R /31/1996	teport
2. Principal f	Place of Business	2a. Mailing Addr	ress			4, FEI Number 65-0424242		<u> </u>	oplied For ot Applicable
Suite, Apt	t#, etc	Suite, Apt. #,	, etc.			5. Certificate of Status Desired		• -	Additional equired
City & Sta	ate	City & State				Election Campaign Financin Trust Fund Contribution	° 🗆		May Be to Fees
Ζφ 4	Country 25	Zip	3	Country		This corporation has liability Florida Statutes	for intangible	a tax under s	
<u> </u>	g. Name and Address of Curre					10. Name and Address of New			
FELDMAN, ROBERT L 300 SEVILLA AVENUE SUITE 05 CORAL GABLES FL 33134				81 82 83	300 Se Suite	ress (P.O. Box Number is Not Acce evilla Avenue 305	ptable)	85 Zip	Çode
11. Pursuant office or	Il to the provisions of Sections 607.05 registered agent, or both, in the Stat am familiar with, and accept the obli	502 and 607.1508, Flori te of Florida. Such char	ida Statutes	the above	named corp	oral Gables poration submits this statement lock	he purpose c	changing i	134 is registered rehistered
	Signature, type dior printed name of registered a	igent and tille if applicable	7 4	in program	West of the second	lion's board of lirectors. I hereby a	CCOPT THE APP	DOMESTIC DE	
SIGNATURE	Signature, lyped or printed name of registered a OFFICERS A	igent and title if applicable	(NOTE I	Registered Age	West of the second	그 화면이 그 회에 가는 것 같아요.	DATE	D DIRECTOR	RS IN 12
SIGNATURE 12.	Signature, lysest or prested name of registered a OFFICERS AI	igent and title if applicable	7 4	Registered Age 13.	West of the second	ed when reinslating)	DATE	17	RS IN 12
GIGNATURE 2. TILE FAME	Stgnarure, typed or printed traine of registered a OFFICERS AI PSTD POIRIER, CHRISTIAN	igent and title if applicable	(NOTE I	Registered Age 13. 1.1 TITLE 1.2 NAME	int signature requir	ed when reinslating)	DATE	D DIRECTOR	RS IN 12
SIGNATURE 12. THE NAME STREET ADDRESS	Stgnarure, typed or printed traine of registered a OFFICERS AI PSTD POIRIER, CHRISTIAN	igent and title if applicable	(NOTE I	Registered Age 13.	ni signature requir ADDRESS	ed when reinslating)	DATE	D DIRECTOR	RS IN 12
SIGNATURE 12. TILE NAME STREET ADDRESS CITY-ST-ZIF	Signature, lyand or printed name of registered a OFFICERS AI PSTD POIRIER, CHRISTIAN 12936 CHERRY ROAD MIAMI FL AS	ogen: and Me if applicable ND DIRECTORS	(NOTE I	Registered Age 13. 1.1 TITLE 12 NAME 1.3 STREET	ni signature requir ADDRESS	ed when reinslating)	DATE	D DIRECTOR	RS IN 12
SIGNATURE 2. ITHE SAME TREET ADDRESS CITY-ST-ZIP OLE	Signature, lyand or printed name of registered a OFFICERS AI PSTD POIRIER, CHRISTIAN 12936 CHERRY ROAD MIAMI FL AS FELDMAN, ROBERT L	ogen: and Me if applicable ND DIRECTORS	(NOTE: I	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S	ni signature requir ADDRESS	ed when reinslating)	DATE	D DIRECTOR	RS IN 12
SIGNATURE 2. DILE FAME STREET ADDRESS SITY - ST - ZIP DILE FAME	Signature, lysed or printed name of registered a OFFICERS AI PSTD POIRIER, CHRISTIAN 12936 CHERRY ROAD MIAMI FL AS FELDMAN, ROBERT L 300 SEVILLA AVENUE #305	ogen: and Me if applicable ND DIRECTORS	(NOTE: I	Registered Age 13. 1.1 TITLE 12 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE	ADDRESS	ed when reinslating)	DATE	D DIRECTOR	RS IN 12
SIGNATURE 2. ITLE AME TREEL ADDRESS ITY-ST-ZIP DLE AME IRFET ADDRESS ITY-ST-ZIP	PSTD POIRIER, CHRISTIAN 12936 CHERRY ROAD MIAMI FL AS FELDMAN, ROBERT L	ogen: and Me if applicable ND DIRECTORS DI	(NOTE I	Registered Age 13. 1.1 TITLE 12 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 22 NAME 2.3 STREET 2.4 CITY-S	ADDRESS T-ZIP ADDRESS	ed when reinslating)	DATE	D DIRECTOF Change Change	RS IN 12 Additio
SIGNATURE 2. THE THEET ADDRESS THY-ST-ZIP THEE THEET ADDRESS THY-ST-ZIP THEET ADDRESS THY-ST-ZIP THEET ADDRESS	Signature, lysed or printed name of registered a OFFICERS AI PSTD POIRIER, CHRISTIAN 12936 CHERRY ROAD MIAMI FL AS FELDMAN, ROBERT L 300 SEVILLA AVENUE #305	ogen: and Me if applicable ND DIRECTORS DI	(NOTE: I	Registered Age 13. 1.1 TITLE 12 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 22 NAME 2.3 STREET 1.2 4 CITY-S 3.1 TITLE	ADDRESS T-ZIP ADDRESS	ed when reinslating)	DATE	D DIRECTOR	RS IN 12 Additio
SIGNATURE 2. THE THE TAME THEFF ADDRESS THY-ST-ZIP THE THEFF ADDRESS THY-ST-ZIP THE THEFF ADDRESS THY-ST-ZIP THE THE	Signature, lyanst or printed name of registered a OFFICERS AI PSTD POIRIER, CHRISTIAN 12936 CHERRY ROAD MIAMI FL AS FELDMAN, ROBERT L 300 SEVILLA AVENUE #305 CORAL GABLES FL	ogen: and Me if applicable ND DIRECTORS DI	(NOTE I	Registered Age 13. 1.1 YITLE 12 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME	ADDRESS T-ZIP ADDRESS ST-ZIP	ed when reinslating)	DATE	D DIRECTOF Change Change	RS IN 12 Additio
SIGNATURE 12. THE STREET ADDRESS CITY-ST-ZIP THE SAME SIRFET ADDRESS CITY-ST-ZIP THE SAME SIRFET ADDRESS CITY-ST-ZIP THE STREET ADDRESS	Signature, lyanst or printed name of registered a OFFICERS AI PSTD POIRIER, CHRISTIAN 12936 CHERRY ROAD MIAMI FL AS FELDMAN, ROBERT L 300 SEVILLA AVENUE #305 CORAL GABLES FL	ogen: and Me if applicable ND DIRECTORS DI	(NOTE I	Registered Age 13. 1.1 TITLE 12 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 22 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 32 NAME 3.3 STREET	ADDRESS T-ZIP ADDRESS ADDRESS ADDRESS	ed when reinslating)	DATE	D DIRECTOF Change Change	RS IN 12 Addition
SIGNATURE 12. THE STREET ADDRESS CITY-ST-ZIP THE SAME SIRFET ADDRESS CITY-ST-ZIP THE SAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP	Signature, lyanst or printed name of registered a OFFICERS AI PSTD POIRIER, CHRISTIAN 12936 CHERRY ROAD MIAMI FL AS FELDMAN, ROBERT L 300 SEVILLA AVENUE #305 CORAL GABLES FL	gen: and Min if applicable ND DIRECTORS DI DI	(NOTE I	Registered Age 13. 1.1 YITLE 12 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME	ADDRESS T-ZIP ADDRESS ADDRESS ADDRESS	ed when reinslating)	DATE	D DIRECTOF Change Change	RS IN 12 Addition
SIGNATURE 12. THE STREET ADDRESS CITY-ST-ZIP THE SIRFET ADDRESS CITY-ST-ZIP THE STREET ADDRESS CITY-ST-ZIP THE STREET ADDRESS CITY-ST-ZIP THE	Signature, lyanst or printed name of registered a OFFICERS AI PSTD POIRIER, CHRISTIAN 12936 CHERRY ROAD MIAMI FL AS FELDMAN, ROBERT L 300 SEVILLA AVENUE #305 CORAL GABLES FL	gen: and Min if applicable ND DIRECTORS DI DI	(NOTE I	Registered Age 13. 1.1 TITLE 12 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREET 1.4. CITY-S	ADDRESS T-ZIP ADDRESS ADDRESS ADDRESS	ed when reinslating)	DATE	D DIRECTOR Change Change	RS IN 12 Addition Addition
SIGNATURE 12. THE STREET ADDRESS CITY-ST-ZIP THE STREET ADDRESS CITY-ST-ZIP THE JAME STREET ADDRESS CITY-ST-ZIP THE JAME STREET ADDRESS CITY-ST-ZIP THE JAME JAME JAME JAME JAME JAME JAME JA	Signature, lysed or printed name of registered a OFFICERS AI PSTD POIRIER, CHRISTIAN 12936 CHERRY ROAD MIAMI FL AS FELDMAN, ROBERT L 300 SEVILLA AVENUE #305 CORAL GABLES FL	gen: and Min if applicable ND DIRECTORS DI DI	(NOTE I	Registered Age 13. 1.1 TITLE 12 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 22 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 32 NAME 3.3 STREET 3.4 CITY-S 4.1 TITLE	ADDRESS T-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP	ed when reinslating)	DATE	D DIRECTOR Change Change	RS IN 12 Addition Addition
SIGNATURE 2. THE THE THE THE THE THE THE TH	Signature, lysed or printed name of registered a OFFICERS AI PSTD POIRIER, CHRISTIAN 12936 CHERRY ROAD MIAMI FL AS FELDMAN, ROBERT L 300 SEVILLA AVENUE #305 CORAL GABLES FL	gen: and tille if applicable ND DIRECTORS DI DI	INDIE I	Registered Age 13. 1.1 TITLE 12 NAME 13 STREET 1.4 CITY-S 21 TITLE 22 NAME 23 STREET 2.4 CITY-S 3.1 TITLE 32 NAME 33 STREET 3.4 CITY-S 4.1 TITLE 4.2 NAME	ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS ADDRESS ADDRESS ADDRESS	ed when reinslating)	DATE	D DIRECTOR Change Change	RS IN 12 Addition Addition
SIGNATURE 2. OUL AME TREET ACORESS ITY-ST-ZIP ITTE AME TREET ACORESS ITY-ST-ZIP ITTE	Signature, lysed or printed name of registered a OFFICERS AI PSTD POIRIER, CHRISTIAN 12936 CHERRY ROAD MIAMI FL AS FELDMAN, ROBERT L 300 SEVILLA AVENUE #305 CORAL GABLES FL	gen: and tille if applicable ND DIRECTORS DI DI	(NOTE I	Registered Age 13. 1.1 TITLE 12 NAME 13 STREET 1.4 CITY-S 21 TITLE 22 NAME 23 STREET 2.4 CITY-S 31 TITLE 32 NAME 33 STREET 3.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREET	ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS ADDRESS ADDRESS ADDRESS	ed when reinslating)	DATE	D DIRECTOR Change Change	RS IN 12 Addition Addition Addition
SIGNATURE 2. THE THE THE THE THE THE THE TH	Signature, lysed or printed name of registered a OFFICERS AI PSTD POIRIER, CHRISTIAN 12936 CHERRY ROAD MIAMI FL AS FELDMAN, ROBERT L 300 SEVILLA AVENUE #305 CORAL GABLES FL	gen: and tille if applicable ND DIRECTORS DI DI	INDIE I	Registered Age 13. 1.1 TITLE 12 NAME 13 STREET 1.4 CITY-S 21 TITLE 22 NAME 23 STREET 2.4 CITY-S 31 TITLE 32 NAME 33 STREET 3.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-S	ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS ADDRESS ADDRESS ADDRESS	ed when reinslating)	DATE	D DIRECTOR Change Change Change	Addition
2. THE THE TABLES STY - ST - ZIP THE TABLES ACCRESS	OFFICERS AI PSTD POIRIER, CHRISTIAN 12936 CHERRY ROAD MIAMI FL AS FELDMAN, ROBERT L 300 SEVILLA AVENUE #305 CORAL GABLES FL	gen: and tille if applicable ND DIRECTORS DI DI	INDIE I	Registered Age 13. 1.1 TITLE 12 NAME 13 STREET 1.4 CITY-S 21 TITLE 22 NAME 23 STREET 2.4 CITY-S 31 TITLE 32 NAME 33 STREET 3.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREET 4.2 NAME 4.3 STREET 4.5 TITLE 5.5 TITLE 5.5 TITLE	ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP	ed when reinslating)	DATE	D DIRECTOR Change Change Change	Addition
2. THE THE TADDRESS SITY ST- ZIP	OFFICERS AI PSTD POIRIER, CHRISTIAN 12936 CHERRY ROAD MIAMI FL AS FELDMAN, ROBERT L 300 SEVILLA AVENUE #305 CORAL GABLES FL	gen; and Molif applicable ND DIRECTORS DI DI DI	INDIE I	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREET 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREET 5.4 CITY-S 5.5 TITLE 5.5 NAME 5.5 STREET 5.4 CITY-S	ADDRESS T-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS ADDRESS ADDRESS ADDRESS	ed when reinslating)	DATE	D DIRECTOR Change Change Change Change	Addition Addition
SIGNATURE 12. THE NAME STREET ADDRESS CITY-ST-ZIP THE SAME SHIFET ADDRESS CITY-ST-ZIP THE NAME STREET ADDRESS CITY-ST-ZIP THE VAME	OFFICERS AI PSTD POIRIER, CHRISTIAN 12936 CHERRY ROAD MIAMI FL AS FELDMAN, ROBERT L 300 SEVILLA AVENUE #305 CORAL GABLES FL	gen; and Molif applicable ND DIRECTORS DI DI DI	INDIE I	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREET 4.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREET 5.4 CITY-S 6.1 TITLE	ADDRESS T-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS ADDRESS ADDRESS ADDRESS	ed when reinslating)	DATE	D DIRECTOR Change Change Change	Addition Addition
SIGNATURE IZ. THE NAME STREET ADDRESS CITY-ST-ZIP THE STREET ADDRESS CITY-ST-ZIP THE NAME	OFFICERS AI PSTD POIRIER, CHRISTIAN 12836 CHERRY ROAD MIAMI FL AS FELDMAN, ROBERT L 300 SEVILLA AVENUE #305 CORAL GABLES FL	gen; and Molif applicable ND DIRECTORS DI DI DI	INDIE I	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREET 4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREET 6.4 TITLE 5.4 CITY-S 6.1 TITLE 6.2 NAME	ADDRESS T-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP	ed when reinslating)	DATE	D DIRECTOR Change Change Change Change	Addition Addition
AGUIT. SIGNATURE 12. THE NAME STREET ADDRESS CHY-ST-ZIP THE	OFFICERS AI PSTD POIRIER, CHRISTIAN 12836 CHERRY ROAD MIAMI FL AS FELDMAN, ROBERT L 300 SEVILLA AVENUE #305 CORAL GABLES FL	gen; and Molif applicable ND DIRECTORS DI DI DI	INDIE I	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREET 4.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREET 5.4 CITY-S 6.1 TITLE	ADDRESS T-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP	ed when reinslating)	DATE	D DIRECTOR Change Change Change Change	

Bobartil. Feldman

SIGNATURE SIGNATURE AND TYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

appears in Block 12 or Block 3 if changed, or on an attachment with an address.

4/2/97

305 - 891-8524

FILED

Apr 22 1997 8:00am

Secretary of State