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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #

P93000061734 (8)

STEVEN J. MITCHEL & ASSOCIATES, P.A. Principal Place of Business Mailing Address						
100 SE 2ND STREET 100 SE 2ND ST SUITE 2910 SUITE 2910		MIAMI FL 33131		3. Date incorporated or Qualified 09/03/1993	3a. Date of Last Report 02/06/1995	
2. Principal Plac	e of Business	2a. Mailing Address		4. FEI Number	L	Applied For
	2nd Street	26 100 SE	2nd Street	65-0430312		Not Applicable
Suite, Apt. #,		Suite, Apt. #, etc.		5. Certificate of Status Desired	S8.75 Additional Fee Required	
2 Surte 2990		City & State	90	& Election Comparing Financing		
Cily & State	(7	28 Miami	FL	Election Campaign Financing Trust Fund Contribution	1 1	00 May Be led to Fees
Zib Zib	Country	Zip .	Country	8. This corporation has liability for i		
4 3317	31 25 USA	29 33131	30 USA	Florida Statutes	⊠ No	
	9. Name and Address of Currer	nt Registered Agent		10. Name and Address of New R	egistered Agent	
			81 Name	Streten J. Mitchel		
	l, steven J.			ress (P.O. Box Number is Not Acceptab	le)	
	2ND STREET		83	o SE 2nd Street		
SUITE 2			" 5	vde 2990		
MIAMI F	L 33131		84 City		FL 85	Zip Code
		0 1007 1500 FL 1 0011		Michael ration submits this statement for the pur		33131
or registered	diagent, or both, in the State of Firm	ida. Such change was authorize	ed by the corporation's boa	and of directors. I hereby accept the app	ointment as register	ed agent. I am
familiar with	, and accept the o bligations o f, lièt	ion 607.6695, Florida Statutes		_	ممارمام	
SIGNATURE	All Cheek of the Color of the Park of the Park of the Color of the Col	t and the it are its able (NO	TE Registered Agent signal ire require	MITCHEL	<u> </u>	
2.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECT	FORS IN 12
itie T	D	☐ DELE1E	1 1 TITLE	RECTOR	☐ Change	e 🔲 Addition
IAMi	MITCHEL, STEVEN J		1.2 NAME	TEVEN J. MITCHEL		
JECHT AD DRESS	L150-WEST-FLAGLER STRE	[] —	13 STREET ADDRESS 4	oo se and Street, Su	nte 2990	
aty-St Zif	- MIAMI FL		14 CHTY-ST-ZIP	110M1, FC 33131		·
IILF		DELETE	2 1 TITLE	•	Changi	e 🔲 Addition
AME			2 S NAME			
TREET ADORESS			2 3 STREET ADDRESS			
DIY-SI-ZP			2 4 CITY - ST - ZIP			
:TLF		☐ DELETE	3 1 TITLE		Change	e 🗌 Addition
IAME			3 2 NAME			
STREET ADDRESS			3.3. STREET ADDRESS			
011Y - ST - 21P		□ DELETE	3 4 CITY - ST - ZIP		Chang	e Addition
[I], F			4 1 TITLE		டு வள்ளு	- LJ Mariton
IAMI			4.2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
DIN \$1-7IP TILE		DELETE	4 4 CITY - ST - ZIP 5 1 TITLE		☐ Chang	e Addition
eAME			5.2 NAME			_
STREET ADDRESS			5.3 STREET ADDRESS			
Shtri Asamoso Shtr St-7P			5.4 CHY-ST-ZIP			
HELE		DELETE	6. 1 TITLE		☐ Chang	ge 🔲 Addition
NAME		Mile. Per	62 NAME			
STREET ALORESS			63 STREET ADDRESS			
DULY STERIE			64 CITY - ST - ZIP			
44 Lide horoka	certify that the information supplied	with this filing is voluntarily furn	shed and does not qualify	for the exemption stated in Section 119	J.07(3)(k), Florida Sta	itutes. I further
oata that I	the information indicated on this and arn an officer or director of the corp Block 12 or Block 13 if changed, or	poration or the receiver or truste	e empowered to execute th	rate and that my signature shall have the his report as required by Chapter 607, F	lorida Statutes; and	that my name

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR MITCHEL ZIZO196 (\$05) \$15-9500