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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1996

DIVISION OF CORPORATIONS

DOCUMENT # P93000064785 (7) 1. Corporation Name					
	GROUP ENTERPRISES,	INC.			
Principal Place of Business Mailing Addres		Mailing Address		I (881)881 III IBIBS MAIR BBAIL I	INNIN KANNI NANIN NIKIN NIKIN KAREN ININI NINI INDI
5240 N.W. 167TH STREET		5240 N.W. 167TH STREET			
MIAMI FL 330	014	MIAMI FL 33014		0.16	3a, Date of Last Report
				 Date Incorporated or Qualified 09/13/1993 	05/01/1995
2. Principal Plac	e of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0553205	Not Applicable \$8.75 Additional
Suite, Apt. #, etc.		Suite, Apt. #, etc.		Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28	Country	Trust Fund Contribution	Added to Fees or intangible tax under s 199.032,
Ζφ 24	Country 25	Z ₁ 0	30	Florida Statutes 🗹 Y	es 🗌 No
	9. Name and Address of Curre			10. Name and Address of New	Registered Agent
			81 Nanie		
Greenfield, Alan e			82 Street Addr	ress (P.O. Box Number is Not Accept	able)
	ONCE DE LEON BLVD.		83		
SUITE 2					
CORAL	GABLES FL 33134		84 City		FL 85 Zip Code
11. Pursuant to	the provisions of Sections 607 05	02 and 607.1508, Florida Stati	ites, the above-named corpor	ration submits this statement for the pird of directors. Thereby accept the a	ourpose of changing its registered office
or registere familiär with	d agent, or both, in the State of Fill i, and accept the obligations of, Se	irida. Such change was aumor iction 607.0505, Florida Statuti	ized by the corporation's boar es.	ing or directors. Thereby accept the a	ppoint to togutties age.
SIGNATURE				eg e gamman merender e	DATE
	opeanire type for ported har college-bleed age. OF BOERS A	ND DIRECTORS	Nulli - Pages and Agend signature require 13.		FFICERS AND DIRECTORS IN 12
12.	PD	☐ DELETE	1 1 TUTLE		Change Addition
NAME	IRVINE, THOMAS J		1.2 NAME		
STREET ADDRESS	5240 N.W. 167TH ST.		1.3 STREET ADDRESS		
CITY - ST - ZIP	HIALEAH FL	ביי היי היי היי היי היי היי היי היי היי	1.4 C-TY - ST - Z-P		Change Addition
TITLE	VPD HENDY	☐ DELETE	2 1 TITLE 22 NAME		C blange C yessiles.
NAME	FINE, HENRY 5240 N.W. 167TH ST.		2.3 STREET ADDRESS		
STREET ADDRESS CITY-ST-ZIP	HIALEAH FL		2.4 CITY - ST - ZIP		
TIFLE	STD	☐ DELETE	3 1 11/LE		Change Addition
NAME	STEINBERG, FERNA		3.2 NAME		
STREET ADDRESS	5240 N.W. 167TH ST.		3.3 STREET ADDRESS		
CITY - ST - ZIP	HIALEAH FL	DELETE	3.4 CITY - \$1 - 7/P		Change Addition
TITLE			4 1 TITLE 4 2 NAME		
NAME STREET ADDRESS			4.3 STHEET ADDRESS		
CITY-ST-ZiP			4.4 CHY-ST-ZIP		
THILE		☐ DELE1E	5 1 T.TLF	AMARIA.	Cnange Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STHEET ADDRESS		
CITY-ST-ZIF		M DOLETE	5.4 CHY-ST ZIP	1.481.00.00	Change Addition
TITLE		☐ DELETE	6 1 THILE 62 NAME		C swards C season
NAME OTOEKT ANDDESS			6.3 STREET ADDRESS		
STREET ADDRESS City - ST-ZIP			6.4.0(TY - ST - 7)P		
14. I do hereb			urnished and does not qualify		19.07(3)(k), Fiorida Statutes I further the same legal effect as if made under
ontp: that	the information indicated on this a Lam an officer or director of the co Block 12 or Block 13 if changed,	irnoration or the receiver or tru	stee empowered to execute tr	his report as required by Chapter 607	, Florida Statutes; and that my name

SIGNATURE:

5/1/96 305-620-7500