COF ANNI	LE NOW: FILING FEE PROFIT DRPORATION NUAL REPORT 1996	FLORIDA DEP Sandr Secre	IS \$225.UU PARTMENT OF STATE fra B. Mortham retary of State DF CORPORATIONS			
1. Corporation		00080300 (	(5)			
SWE	ERDLOW MANAGEMENT CO	MPANY				ł
Principal Place	e of Business	Mailing Address		I INDANOBA KAT ARKED KAN ODAN /		A
200 SOUTI	DORE R. STOTZER TH PARK RD., #200 DOD FL 33021	% THEODORE R. S 200 SOUTH PARK R HOLLYWOOD FL 33	RD #200	3. Date Incorporated or Qualified		[
	Place of Business	2a. Mailing Address		11/19/1993 4. FEt Number	04/26/1995	_
21 Suite, Apt.	t ato	26 Suite Ant # etc		65-0461090	Not Applicable	ð
22		Suite, Apt. #, etc.		5. Certificate of Status Desired	KK \$8.75 Additional Fee Required	7
City & State 23	,e	City & State		6. Election Campaign Financing	<b>\$5.00</b> May Be	4
Zip	Country	28 Zip	Country	Trust Fund Contribution  B. This corporation has liability for	Added to Fees	-
24 .	25 9. Name and Address of Curren	29 nt Beoistered Agent	30	Florida Statutes	és 🗋 No	
à		T Registered Agen	81 Name	10. Name and Address of New I	Registered Agent	-
	ZER, THEODORE R		82 Street Add	dress (P.O. Box Number is Not Acceptal	abla)	_
200 SC #200	South Park RD.		83		IDie)	
	YWOOD FL 33021					
	to the provisions of Sections 607.0502 ared agent, or both, in the State of Florid		84 City		FL 85 Zip Code	7
familiar wit	Signature, typed or printed name of registered agent a	tion 607,0505, Florida Statutes	IZEd by the corporation's boar IS. IOTE: Registered Agent signature required 13.	red when reinstating)	DATE FICERS AND DIRECTORS IN 12	
TITLE	СР	DELETE	1. 1 TITLE	AUDITIONS/UTANULS TO UT	FICERS AND DIRECTORS IN 12	E034 (12/95)
NAME STREET ADORESS	SWERDLOW, MICHAEL J		1.2 NAME		<b>-</b>	145
STREET ADDRESS CITY+ST-ZIP	200 SOUTH PARK RD., #200 HOLLYWOOD FL	.0	1.3 STREET ADDRESS 1.4 City - St - Zip			10
TITLE	SRVS	DELETE	2. 1 TITLE		Change 🗋 Addition	- è
NAME STREET ADDRESS CITY - ST- 7/P	STOTZER, THEODORE R 200 SOUTH PARK RD #200 HOLLYWOOD EL	J	2 2 NAME 2 3 STREET ADDRESS			
CITY-ST-ZIP TITLE	HOLLYWOOD FL VAS		2.4 CITY-ST-ZIP 3.1 TITLE		Change Addition	_
NAME	IAMMATTEO, MARIE	<u> </u>	3.2 NAME		🗋 Change 🔲 Addition	
STREET ADDRESS	200 SOUTH PARK ROAD		3.3. STREET ADDRESS			
CITY-ST-ZIP TITLE	HOLLYWOOD FL	DELETE	3 4 CITY-ST-ZIP 4. 1 TITLE		Chases C Addition	_
NAME	1		4.2 NAME	90000180 -04/30/96~-010	Change Addition	
STREET ADDRESS	1		4.3 STREET ADDRESS	-04/30/96010 ***208,75	043024	
CITY-ST-ZIP TITLE		DELETE	4.4 CITY - ST - ZIP	*** <b>*</b> LUU, iJ		
NAME	1		5.1 TITLE 52 NAME		Change Addition	]
STREET ADDRESS	1		5.3 STREET ADDRESS			
CHTY - ST - ZIP TITLE		DELETE	5.4 CITY - ST- ZIP			
NAME	I		6. 1 TITLE 6.2 NAME		Change Addition	
STREET ADDRESS	1		6.3 STREET ADDRESS		N-2054	K
CITY-ST-ZIP 14. I do hereby	- notify that the information sympliad a	and the second second form	6 CITY-ST-ZIP		1 Mix	
certify that t oath; that i appears in '	y certify that the information supplied wil the information indicated on this annual I am an officer or director of the corpora Block 12 or Block 13 if changed, or of	th this filing is very name runner y eport or supplemental annu allon or the receiver or this see in a attachment with an addre	shed and does not quality to lat report is true and accurat personwered to execute this ass	If the exemption stated in Section 119.0 te and that my signature shall have the s report as required by Chapter 607, Fi	.07(3)(k), Florida Statutes, Thurther same legal effect as if made under lorida Statutes; and that my name	
SIGNATU	'URE: / *	N VIN		3/27/96	(954) 981-1000	
	SIGNATURE AND TYPED OF F	PRINTED NAME OF SIGNING OFFICER	R OR DIRECTOR	Data	Davime Phone &	