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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

May 14 1997 8:00am

Secretary of State

Machan

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000081624 (7)

STANLEY M. NEWMARK, P.A.

Principal Place of Business Mailing Address											
						_				II OPOT IDAL	
9400 S. DADEL SUITE 300 MIAMI FL 33150		9400 S. DADELAND BLV Suite 300 Miam! Fl 33156-2890									
							Date Incorporated or Qualified 11/22/1993		ate of Last F 01/1996	Report	
2. Principal Pl	ace of Business	2a. Mailing Address				4.	FEI Number 65-0452050		├ ── 	pplied for	
Sulte, Apt. #, etc.			Suite, Apl. #, etc.				00-0402000			ot Applicable Additional	
22		27				5.	Certificate of Status Desired	X		equired	
City & State	9	City & State				6.	Election Campaign Financing		\$5.00	May Be	
23		28					Trust Fund Contribution			to Fees	
Zip 14	Country 25	Zip	⊢ 1	untry		8.	This corporation has liability for			:. 199.032,	
[4]	9. Name and Address of Curr	29 ent Registered Agent	30	·		10	Florida Statutes		_ No Agent		
NEW	MARK, STANLEY M			81	Name			g	- Igoin		
	S. DADELAND BLVD.		•	82	Stroot Add	1000 /	O Day Number is Not Asserted				
SUIT	E 300			02	SHEET AUG	ddress (P.O. Box Number is Not Acceptable)					
MIAN	AI FL 33158			83			The second secon				
				84	City				85 Zip	Code	
44. 5]]	,			FL	. ' '		
office or re agent. I a	o the provisions of Sections 607.0 egistered agent, or both, in the Sta m familiar with, and accept the ob-	and 607, rada, Honda Stati ite of Florida. Such change was igations of, Section 607,0505, F	utes, the a s authorize Horida Sta	neve- d by tutes.	marned corpora	poratio tion's b	n submits this statement for the popular of directors. Thereby acceptions	ourpose of of the app	changing i ointment as	ts registered registered	
SIGNATURE											
12.	Signature, typed or pointed name of registered.	opent and tipe if applicable (NO IND DIRECTORS		d Agen	l signatur requ			DAH			
TITLE	D OFFICENS P	DELETE		13.			ADDITIONS/CHANGES TO OFFIC	ERS AND	DIRECTOR Change	RS IN 12	
NAME	NEWMARK, STANLEY M		1.2 N						Onlings	☐ Maderion	
STREET ADDRESS 9400 S. DADELAND BLVD.,		SUITE 300		1.3 STREET ADDRESS							
CITY-ST-ZIP	MIAMI FL 33156			1 Y - \$1 -							
TITLE		☐ DELETE	211	TLE			W. T. V.		Change	Addition	
NAME			2 2 N	AME							
STREET ADDRESS			23\$	TREET A	DORESS						
CITY-ST-ZIP		DELETE		2 4 C(1Y-ST-ZIP							
TITLE NAME		L.J DUCTE	31 TIPLE 32 NAME						Change		
STREET ADDRESS					DEDI OO						
CITY-ST-ZIP					DORESS						
TITLE		DELETE	34 CHY-81-7IP DELETE 4.1 TITLE		4.11				Change	Addition	
NAME			4 2 NAME								
STREET ADDRESS			4 3 S	IBEET A	DDRESS						
CITY-ST-ZIP			4 4 C	114-51-	- 7)P						
TITLE		☐ DETETE	DELETE 517		1 TITLE				Change	Addition	
NAME			5 7 N	AML							
STREET ADDRESS					DDRESS						
CITY-ST-ZIP TITLE	, <u>, , , , , , , , , , , , , , , , , , </u>	DELETE		IY-\$1-	- ZIP				Channe	Address	
NAME		ortale	611I 62N						Change	Add tion	
STREET ADDRESS			62 N/ 63 S1		titigat ec						
CITY-ST-ZIP				IKEET A ITY - ST -	DDRESS 700						
14. I do hereb	y certify that the information suppl	ied with this filing does not qua	lify for the	exent	notion stated	d in Se	ction 119 07(3)(i). Florida Statute	s. I further	certify that	the	
intormat⊦or I am an of	i indicated on this annual report of ficer or director of the corporation i Block 12 or Block 13 if changed,	r supplemental annual report is or the receiver or trustee empo	true and a wered to e	accora	ate and that	mv sir	nnature shall have the same loca	Loffort as	if made un	dor oath: that	