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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # P93000082965 (3)

FILED Feb 18 1997 8:00am Secretary of State

Principal Place of Business 8360 SUNSET DRIVE SUITE 291 MIAMI FL 33173 US		Mading Address 9360 SUNSET DRIVE SUITE 291 MIAMI FL 33173-3273 US	8360 SUNSET DRIVE SUITE 201 MIAMI FL 33173-3273			3. Date Incorporated or Qualified 12/02/1993 3a. Date of Last Report 04/22/1996			
2. Principal I	Place of Business	2a. Mailing Address				4. FEI Number			plied For
21		26				65-0461838			ot Applicable
Suite, Apt	t. #, etc	Suite, Apt. #, etc.				5. Certificate of Status Desired	X	\$8.75	Additional equired
City & Sta	ılrı	City & State				6. Election Campaign Financin	NO.	\$5.00	
23		28				Trust Fund Contribution	" _□	Added	
Zφ	Country	Zip	Cou	untry		8. This corporation has liability			. 199.032,
24	25	29	30			Florida Statutes	X Yes		·
	9, Name and Address of Curi			81 Nam		10. Name and Address of Nev	v Registered	Agent	
	AMI CORPORATE SYSTEMS IN	C.		81 Nam	9				
	00 BLUE LAGOON DR. ITTE 700			82 Stree	t Addres	ss (P.O. Box Number is Not Acce	ptable)		
	AMI FL 33126			83					
me	AMITE SSIED								
				84 City			FL	85 Zip	Code
11. Pursuant office or agent. I:	t to the provisions of Sections 607.0 registered agent, or both, in the Sta am familiar with, and accept the ob	0502 and 607.1508, Florida Stati ate of Florida Such change was digations of, Section 607.0505, F	utes, the a s authorize Florida Sta	above-name ed by the co atutes.	d corpor orporation	ration submits this statement for n's board of directors. I hereby a		f changing i pointment as	is registered registered
SIGNATURE	Signature, typed or princed name of registered	agent and little if applicable (No	OTE: Rogistera	ed Agent signat		when reinstaling)	the purpose of accept the app		
SIGNATURE	Signatural typed or princed name of registrated OFFICERS A	agent and little if applicable (NO	OTE: Registere	ed Agent signat			the purpose of accept the app	D DIRECTOR	RS IN 12
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To or indexest carring that the information supplied war his annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.