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PROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P94000011031 (9)

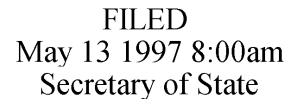
ALEVAI, INC.

| Princ | ipal P | ace (| of Bus | iness |
|-------|--------|-------|--------|-------|
| | | | | |

Mailing Address

CORAL SOUARE MALL

P.O. BOX 9736





| K9163 W. ATLANTIC BLVD. CORAL SPRINGS FL 33071 | | CORAL SPRINGS FL 33075-9736 | | Date Incorporated or Qualified | 3 n | to of Les | t Report | |
|---|---|--|---|--------------------------------|--|-------------------------|--|---|
| | | | | | 02/04/1994 | | 3a. Date of Last Report 08/08/1996 | |
| ' | lace of Business | 2a. Mailing Address | | | 4. FEI Number | | L., | Applied For |
| 21 | A | 26 | | | 65-0469289 | | AA = | Not Applicable |
| Sulte, Apt. | #, etc. | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired | | | 5 Additional Required |
| City & State | 9 | City & State | | | Election Campaign Financing Trust Fund Contribution | | | 00 May Be ed to Fees |
| Zip 24 | Country 25 | 7ip | Country 8. This corporation has liability for intangible tax under 30 Florida Statutes | | | | or s. 199.032, | |
| | 9. Name and Address of Curren | | | T | 10. Name and Address of New Re | | | |
| HOV | VITT, STUART | | 81 | Namo | | | ** | |
| | W MCNAB RD | | 82 | Stroot Ac | idross (P.O. Box Number is Not Acceptab | 10) | | |
| #20 | 7 | | 83 | J | Torbas (F.O. Box Number 18 Not Acceptab | | | |
| IAM | ARAC FL 33321 | | 84 | <u> </u> | | | 85 7 | 'ıp Code |
| | | | " | | | FL | | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| 11. Pursuant office or reagent. I a | to the provisions of Soctions 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga | 2 and 607,1508, Florida Statu of Florida. Such change was ations of, Section 607,0505, F | ites, the above authorized be lorida Statuto | re-named corposs. | orporation submits this statement for the p ration's board of directors. I hereby accep | urpose of t the appo | changin pintment | g its registered as registered |
| SIGNATURE | Signature, typed or printed name of registered age | |) I I : Registered Ap | eni signaturo re | quired when reinstating) | DVJE | | |
| 12, | OFFICERS ANI | | 13. | | ADDITIONS/CHANGES TO OFFIC | | | |
| TITLE | Р | L DELETE | 1.1 101.8 | | | | Chan | ge Addition |
| NAME | WOSKOBOJNIK, LEON M | • | 1.2 NAME | | | | | |
| STREET ADDRESS | 10714 NW 21ST STREET | | 1.3 STREE | 1 ADDRESS | | | | |
| CITY-ST-ZIP | CORAL SPRINGS FL 33071 | | 1.4 CHY- | SI-ZIP | | | | |
| TITLE | V | DETEJE | 211IILE | | | | Chang | ge 🔲 Addition |
| NAME | WOSKOBOJNIK, MARTA L | | 2.2 NAME | | | | | ļ |
| STREET ADDRESS | 10714 NW 21ST STREET | | 2.3 STREE | 1 ADDRESS | | • | | |
| CITY-ST-ZIP | CORAL SPRINGS FL 33071 | | 2. 4 City | ST - ZIP | | | <u> </u> | |
| TITLE | | ☐ DELETE | 3.1 7 II LE | | | | L Chan | ge [_] Addition |
| NAME | | | 3.2 NAME | | | | | İ |
| STREET ADDRESS | | | 3.3 STREE | 1 ADDRESS | | | | l |
| CITY-ST-ZIP | | DECEN | 3.4. C(1) | S1-ZIP | | | | |
| TITLE | | DECETE | 4.1 Till E | ļ | | | Chan | ge [_] Addition |
| NAME | | | 4. 2 NAM | 1 | | | | |
| STREET ADDRESS | | | | T ADDRESS | | | | |
| CITY-ST-ZIP | | Tours | 4.4 CITY- | ST-ZIP | | | 1 05 | |
| TITLE | | ☐ DELETE | 5.1 TITLE | | | | L Chan | ge Addition |
| NAME | | | 5.2 NAME | | | | | |
| STREET ADDRESS | | | | 1 ADDRESS | | | | |
| CITY-ST-ZIP | | Driev | 54 DITY | S1 - 7(P | | | 1 0 | |
| TITLE | | L DELETE | 61 NIFLE | 1 | | | L Chan | ge L. Addition |
| NAME | | | 62 NAME | | | | | |
| STREET ADDRESS | | | | I ADDRESS | | | | |
| CITY-ST-ZIP | | | 6.4 DITY- | ST-ZIP | | | | |

I up nereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information Indicated on this 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.

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