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

Mailing Address

12707 SW 146 LANE

PROFIT CORPORATION ANNUAL REPORT **1997** 

Principal Place of Business

SIGNATURE: X

12707 SW 146 LANE



FLORIDA DEPARTMENT OF STATE

**FILED** 

Feb 12 1997 8:00am

Secretary of State

233-3041

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P94000011227 (3)

## P & R MARKETING ADVERTISING PROMOTIONS, INC.

MI Us	iami fl. 3318 R	RS			MIAMI FL 33188-6356 US														
				•						3. Date Incorporated or Qualified 02/10/1994 05/01/1996									
2.	Principal Pl	ace of Busin	iess	2a. Mai	2a. Mailing Address					4.	FEI Numb				•	L	App	olied Fo	r
21				26	26						65-0466552						Not	Applic	able
Suite, Apt #, etc.				······	Suite, Apt. #, etc.					5.	Certificate	of Statu	s Desire	od				dditions quired	al
City & State				City	City & State					6.	Election C	ampaigr	Financi	ing		\$5	.00	May Be	
23					28												Fees		
24	Zip	\	Country 25	Zip 29		Country 30				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes									2,
24		9. Name	and Address of Curr		I Agent	130				10.	Name an		ss of Ne					·	
	NAV		<del></del>				B1	١	lame			<del></del>		<u>_</u>		<del></del>			
NAVARRETE, PAULA A 12707 S.W. 146 LANE							93 Care et Add								<del></del>				
		MI FL 3318			82 Street Add				street Addre	ress (P	Y.U. BOX N	ımber iş	NOT ACC	ертари	<b>e</b> )				
	ITINA						83				··								
							84	7	City						FL	85	Zip C	ode	
11	office or re	egistered ac	ions of Sections 607.09 gent, or both, in the Sta ith, and accept the obli	te of Florida. S	uch change was	authoria	ed by	v th	amed corpo e corporati	poratio tion's t	n submits board of di	this state rectors.	ment for hereby	r the pu accept	rpose o	t chang pointme	ing its nt as i	register register	ed ed
SI	agent. Lai GNATURE:	m tamiliar w	ith, and accept the obl	gations of, Sec															
L.		Signature, typec	for printed name of registered a					ent s	ignature require				PO TO	0000	DATE	DIDEC	NT 0 BY	11146	
12	γ	NAAT	OFFICERS A	ND DIRECTOR		13			<del></del>		ADDITION:	S/CHAN	SES TO	OFFICE	HS ANL				
TIT	ŀ	DPST	CTC DAINA A		DELETE		TITLE									L Cha	ange	∐ Add	amon
NA	ME		ETE, PAULA A			1.2	NAME												
STI	REET ADDRESS		.W. 146 LANE			1.3	STREET	T ADI	Dress										
_	Y-ST-ZIP	MIAMI F	L 33186				CITY - 5	ST-Z	IP							1 2			
TIT	ιE				DELETE		TITLE									L Uni	ange	∐ Adı	OHION
NA	ME					2.2	NAME												
ST	REET ADDRESS					2.3	STREET	T AD	Dress		. :				9 .				
	Y-S1-ZIP						CITY-	ST-	ZIP			<u> </u>							4'4'
TIT	LF				☐ DELETE	3.1	TITLE						:				ange	A0	idition
KA	MÉ					3.2	NAME		į										
ST	REET ADDRESS					3.3	STREET	T AD	DAESS										
$\overline{}$	[Y-\$T-7IP						CITY-	ST-	ZIP			····			· · · · · ·	FT a.			
TIT	't f				☐ DELETE		TITLE									☐ Ch	ange	AD	ldition
NA.	ME					4.	2 NAME												
\$T	REET ADDRESS					4.3	\$TREET	TAD	ORESS										
-	IY-ST-ZIP				OF PER		CITY-S	ST-Z	?IP							T 1 60		1 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	tallel - a
ווז	'LE				☐ DELETE		TITLE									L Ch	ange	A0	dition
NA.	ME						NAME												
ST	REET ADDRESS					5.3	STREET	TAD	ORESS										
	IY-ST-ZIP						CITY-S	ST-2	tiP					<del></del>		h-1 7:			. ala:
ווד	LE	i			DELETE		TITLE									∐ Ch	ange	L. Ad	dition
NA.	ME					6.3	? NAME												
ST	reet adoress					6.	STAEE	T AD	DRESS										
	TY-ST-ZIP						CITY-S					Z212111:							
14. I do hereby 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; the Lam 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.													າ; that						