FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

P94000014357 (5)

DOCUMENT #

LADY BLI					
Principal Place of Business Mailing Address 735 NW 123 AVENUE 735 NW 123 AVENUE MIAMI F: 33182 MIAMI F: 33182			E	**************************************	
				 Date Incorporated or Qualified 02/21/1994 	3a. Date of Last Report 05/01/1995
2. Principal Place	of Business	2a. Mailing Address		4. FEI Number 65-0473272	Applied For Not Applicable
Suite, Apt. #, 6	etc.	Suite, Apt. #. etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	28	Country		or intangible tax under s 199.032,
4	25 9. Name and Address of Curre	29	30	Florida Statutes Ye 10. Name and Address of New	es No
	9. Name and Adoress of Curre	ant Registered Agent	81 Name	It. Name and Address of New	riegistereu Agent
AUSTIN, RI	CHARD B			Address (P.O. Box Number is Not Accept	able)
8390 NW 5 SUITE 300	3 STREET		83		
MIAMI FL 3	3182				\ \ \
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			84 Oity		FL 85 Zip Code
SIGNATURE Signature 12. The NAME	d BREW	NO DIRECTORS	(N. (f) Registrate Agent separation in 13. 1.1 Title 1.2 NAME		CATE FFICERS AND DIRECTORS IN 12 Change Addition
STREET ADDRESS	735 NW 123 AVENUE MIAMI FL 33182		1 3 STREET ADDRESS	735 NW 128 AVEN	10 6
CITY-SI-ZIF TITLE	INDANI I E OO IOE	DELETE	1.4 GITY IST ZIP 2.1 TITLE	MIAMI PC GOIL	Change Addition
NAME		_	2.2 NAML		
STREET ADDRESS			2 3 STREET ADDRESS		
CITY-S1-ZIP TITLE		[] DELETE	2.4 CHY+ST-ZIP 3.1 TITLE		Change Addition
NAME			3 2 NAME		
STREET ADDRESS	<i>;</i>		3.3 STREET ADDRESS		
C/TY - ST - 7:P			3 4 CITY - ST - ZIF		
TOLE	1	☐ DELETE	4 1 TifleF		☐ Change ☐ Addition
NAME	į		4.2 NAME		
STHEET ADDRESS	\		4.3 SFREET ADDRESS 4.4 City - St - Zip		
TITLE		DELETE	5 1 111LE		Change Addition
NAME		_	5.2 NAME		
STREET ADDRESS	•		53 STREET AUDRESS		
CITY+ST+ZIP			5.4 CITY - \$1 - 7IP		
TITLE		☐ DELETE	6 1 TITLE		☐ Change ☐ Addition
NAME			62 NAME		
STREET ADDRESS			6.3 STREET ADORESS		
CITY ST-ZIP	note for the information over to	ducitly the filme in connectories	6.4 CHY S1-ZIF	alify for the exemption stated in Section 1	19.07/3/kt. Florida Statutes Hurther
andification to	an information indicated on this or	and of remarks or expendence and a	angual romert is true and ac	curate and that my signature shall have t te this report as required by Chapter 607,	ne same legal effect as it mage under

THE CONTROL OFFICER OR DIRECTOR **SIGNATURE:**