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

PROFIT ,CORPORATION ANNUAL REPORT



FLORIDA DER<del>AFFIMENT</del> OF STATE

Sandra B. Mortham Secretary of State \* \*

DIVISION OF CORPORATIONS

1996

## P94000017676 (5) **DOCUMENT #**

1. Corporation Name

DAY VILLA ELODIDA

PAX VILLA FLORIDA, INC.						
Principal Place o	of Business	Mailing Address		( 48 B ( 18 B 4 B 11 B 18 B 11 B 18 B 11 B 11 B	1841) BB101 (1911 PB16 81)11 (8Bf) E161 (9B1	
770 NW 119TH ST MIAM! FL 33168		40 N.E. 54TH STREET MIAMI FL 33137				
US				Date Incorporated or Qualified     03/02/1994	3a. Date of Last Report 08/24/1995	
2. Principal Place of Business 21		2a. Mailing Address		4. FEI Number 65-0522013	Applied For Not Applicable	
Suite, Apt. #	, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional	
City & State	·	City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Bo Added to Fees	
Zip <b>24</b>	Country 25	7ip 3	Country	This corporation has liability for in Florida Statutes		
	9. Name and Address of Current			10. Name and Address of New Re	egistered Agent	
MDFALES MATHE SUITE 60	ALICHMEND MARIE	CECILE DES		MARIE (ECI/E ddress (P.O. Box Number is Not Acceptable 4.0 N.E. 54	DESIR St-	
(Mygra	MAN	vi 1933/3	2 84 City	Miami	FL 85 Zip Cody 37	
or registere	othe provisions of Sections 607,0502 a id agent, or both, in the Stato of Florida i, and accept the obligations of, Sectio	i. Such change was authorized b	he above named copy by the corporation's b	poration submits this statement for the purpopard of dimetors. I hereby accept the appo	pose of changing its registered office intment as registered agent. I am	
SIGNATURE L	and the second s	MARIE C. DES/	RHOEN Scristred Agent signature re	2.	28.96	
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	DERS AND DIRECTORS IN 12	
TITLE	Р	[] DELETE	1, 1 TILLE - P	ST. AMAND, FR	ED Change Addition	
NAME	ST AMAND, FRED	cust	1.2 NAME	UNNE 54 ST	2. 15R	
STREET ADDRESS	1000 BHANNIS AREA 40 MIAMI FL 33/37	N.E. 24 So	1.3 STREET ADDRESS	ST. AMAND, FR 40 NE 54 ST MIAMI, F/- 3	3137	
CHY-ST-ZIP TITLE	VP ,	DETE1E	1.4 City - \$1 - ZIP 2. 1 Title <b>VP</b>	St ANAUN FREN T	Change Addition	
NAME STREET ADDRESS	ST AMAND, FRED 2350 NE 135TH SYT 1504		2.2 NAME 2.3 STREET ADDRESS	St. AMAND, FRED J. 2350 NE 135:	51 411504	
CITY-ST-ZIP	MIAMI FL		2 4 C(1 Y - ST - ZIP	MIAmi , 71. 3316	1	
THIE	$\int_{S}^{S} dA dA dA dA A A$	(IA) DEFENS	3. 1 TITLE	•	Change () Addition	
NAME /	POSOVNE LEOSTHUST 601	/\ /\	3.2 NAME			
STREET ADORESS CHY-ST-7	MAMI FL	$\bigcirc$	3.3. STREET ADDRESS 3.4 City-St-Zip		·	
TITLE	70	☐ DECETE	4 1 TITLE		Change Maddition	
NAME		,	4.2 NAVIE			
STREET ADDRESS			43 STREET ADDRESS	10000170	000001	
C(1Y+S1+2)F		Print date of the control of the con	4.4 C/TY - ST - ZIP	10000178 -04/17/96-010	<del>                                    </del>	
TITLE		☐ DELETE	5. 1 TITLE	***200.00	Change Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
011Y - 51 - 20F	w	[] DELFTE	54 City-St-ZiP 6 1 Title		Change ( ) Addition	
NAME		Land Street 14	6.2 NAME	4	11/16/96	
1					1.1/11/5° 1.	

14. Ido hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutos. 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 certi. 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 adjachment with an address.

6.4 CITY - ST - ZIP

6.3 STREET ADDRESS

SIGNATURE: -

STREET ADORESS

011Y-51-20P

2-28.96 (305-758-7042)