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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

FILED May 06 1997 8:00am Secretary of State

1		***************************************		 -	•		
DOCU	MENT # P94000	017835					
OR	LA INTERNATIO	NAL GRAF	ax, INC.				
Deviced Drog	on of Physicians	Mailing Address	· · · · · · · · · · · · · · · · · · ·				
1 '	se of Business S.W. 30th Avenue		w 30th ave	,			
10-		1059 30	w som we				
Deech	eld Beach, Pl	Deerfield B	seach 19	3. Date incorporated or Qualified 3a.	Date of Last Re	port	
334	1L	33442			04-17.9		
2. Principa! F	lace of Business	2a. Mailing Address		4. FEI Number	Apr	plied For	
21	ll ata	26 Suite Ant # sta		65-0472634		Applicable	
Suite, Apt	#. CCC	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 A Fee Red		
City & Stat	16	City & State		6. Election Campaign Financing	\$5.00	·	
23		28		Trust Fund Contribution	Added to	-	
Zip 24	Country 25	Zip	Country 30	8. This corporation has liability for intang Florida Statutes Yes	ible tax under s.	199.032,	
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Register	ed Agent		
Pere	etz Andrew, Es	ଭ.	81 Name				
1 East Browned Blvd			82 Street Addr	ess (P.O. Box Number is Not Acceptable)			
1	te 620		63				
PT.	- laudendale P1.	33301	84 City	. F	85 Zip C	ode	
office or r	to the provisions of Sections 607,0502 registered agent, or both, in the State of	and 607.1508, Florida Statute f Florida, Such change was a	uthorized by the corporat	oration submits this statement for the purpos ion's board of directors. I hereby accept the	e of changing its appointment as r	registered registered	
agent La SIGNATURE	erri lamiliar with, and accept the obligat	ons of, Section 607.0505, Fiol	rida Statutes.				
ļ	Signature typed or printed name of registored agent		: Registered Agent signature require			3.01.45	æ
12.	OFFICERS AND	DELETE	13.	ADDITIONS/CHANGES TO OFFICERS	Change	Addition	CR2E034 (9/96)
NAME	MALKA BOWA	20	1.2 NAME				Z S
STREET ADDRESS	2020 S DECAN	13 Na 4116	1.3 STREET ADDRESS				
CITY - ST - ZIP	Hallomdely M.	33008	1,4 CITY-ST-ZIP				쮼
TITLE	,	☐ DELETE	2.1 TITLE		☐ Change	Addition	Ç
NAME			2.2 NAME			-	
STEET ADDRESS			2.3 STREET ADDRESS				
CHY-SI-ZIP THUE		DELETE	2 4 CITY-ST-ZIP 31 TITLE		Change	Addition	
NAME	(32 NAME				
STREET AUDRESS			3 3 STREET ADDRESS				
CHY-S1-70°			3.4. CITY-ST-ZIP				
TIFLE		☐ DELETE	4) TITLE		Change	Addition	
NAMé			4 2 NAME			-	
STREET ADDRESS			4.3 STREET ADDRESS		1,	ļ	
CDY ST 7tf		DELETE	4.4 CITY - \$1 - ZIP 5.1 TITLE			Addition	
NAME			5.2 NAME		711-	777	
STREET ADORESS			5.3 STREET ADDRESS		ブハン	MA	7
00Y St 20			5 4 CITY-ST-ZIP		11/4	W/ /+	4
THE		DELETE	61 TITLE	100002178	S Change	Addition	
NAME			6.2 NAME	-05/14/9701102-	-037		
STEFFT ADURESS	,		6.3 STREET ADDRESS	100002178 -05/14/9701102- ***165.00			
CII t - SI - 7IP		with this filing stops not a with	6.4 CiTY-ST-ZIP			ho	
ir formatic	by certify that the informations updated on this affordal ties of the officer or director of the overall of the officer of the order of the overall of the order of the overall of the ove	plemental annual report is true receiver or trustee emogwe	ue and accurate and that ared to execute this repor	in Section 119.07(3)(i), Florida Statutes, I fur my signature shall have the same legal effect t as required by Chapter 607, Florida Statute	as if made und	er oath; that	