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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

POCUMENT # P94000026682 (2)

IVY CO	URT REPORTING SERVICE	E, INC.								
Principal Plac	se of Business	Mailing A	Aparess				-		ita 1111 1111 16 11	
17251 N.E. 19 N. MIAMI BEA		17251 N.E. 19TH AVE. N. MIAMI BEACH FL 33162-2209								
							3. Date incorporated or Qualifie 04/07/1994		Date of Last Re)4/30/1996	eport
2. Principa: F	Place of Business	2a. Mailin	ng Address	· · · · · · · · · · · · · · · · · · ·		··,······	4. FEI Number			plied For
н		26				·	65-0485402			t Applicable
Suite, Apt. #. etc.		Suite, Apt. #, etc.					5. Certificate of Status Desired		\$8.75 A Fee Re	
City & Sta	le		& State				6. Election Campaign Financing		\$5.00	
3		28					Trust Fund Contribution		Added t	
Zip	Country	Zip		Cou	intry		8. This corporation has liability f			.199.032,
4	25	29		30		·	Florida Statutes		☐ No	
	9. Name and Address of Curr	ent Registered	Agent		81	Name	10. Name and Address of New	Register	ed Agent	
	IAN, DAVID P ESQ	-1.750			61	Name				
2800 FIRST UNION FINANCIAL CENTER 200 S NISCAYNE BLVD					82	Street Addr	ess (P.O. Box Number is Not Accep	table)		
	MI FL 33131									
					84	City			85 Zip (Code
agent La	registered agent, or both in the Sta am familiar with, and accept the obl DAVIO P. M. Stjent in the fundamental registered.	ligations of, Sect	tion 607.05 05 , I	Florida Sta	tutes	5 .	oration submits this statement for the control of the control of directors. I hereby actions when relinstating	cept the	Appointment as	registered
12.	OFFICERS A	ND DIRECTORS	3	13.			ADDITIONS/CHANGES TO OF	FICERS A	AND DIRECTOR	S IN 12
THLE	D		☐ DELETÉ	1.1 TI	TLE				Change	Addition
NAME	MILIAN, REBECCA I			1.2 N	AME	1				
STREET ADDRESS	17251 N.E. 19TH AVE.			13S	TREET	ADDRESS				
City - St - ZIP	N. MIAMI BEACH FL					T - ZIP				
TITLE			DETELE	. 2111		ļ			☐ Change	Addition
NAME				2.2 N						
STREET ADDRESS						ADDRESS				
CITY - ST - ZIII*			DELETE	2. 4 C		SI - ZIO			Change	Addition
NAME			L.J DELETE	3.1 V		\			Change	L Abunior
	1					ADDRESS				
STREET ADDRESS	İ					ST-ZIP				
CITY - ST - ZIP TITLE	 		DELETE	4.1 [1		SI-ZIP			Change	Addition
NAME				4.21					Line Districted	
STREET ADORESS						ADDRESS				
CITY ST-2F						T-ZIP				
THILE	 		□ DELETE	5.1 TI		11-41-			Change	L. Additio
NAME						1				
THE RES.				■ 59 N	AM-	ı				
STREET ADDRESS					AMÉ TREET	ADDRESS (

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 acroupt 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.

6.4 CITY - ST - ZIP

6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS

me

STREET ADDRESS

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DECETE

FILED

Jan 17 1997 8:00am

Secretary of State

Change

Addition