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

P94000034848 (9)

Principal Plac 12030 SW 86T MIAMI FL 3316	TH STREET	Mailing Address 12030 SW 88TH STREET MIAMI FL 33188-2002 US	· · · · · · · · · · · · · · · · · · ·		
US		US		3. Date Incorporated or Qualified	3a. Date of Last Report
9 Principal P	lace of Business	2a. Mailing Address		05/09/1994 4. FEI Number	08/12/1996 Applied For
21. Fritticipal F	Idog Or Dusiness	26		65-0509446	Not Applicable
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.			\$8.75 Additional
22		27	····	5. Certificate of Status Desired	Fee Required
City & Stat	ө	City & State		6. Election Campaign Financing	\$5.00 May Be
23 Zip	Country	28 Ζιρ	Country	Trust Fund Contribution	Added to Fees
24	25	⊢ `	30	This corporation has liability for Florida Statutes	i∕itangible tax under s. 199.032, ☑ Yes □ No
	9. Name and Address of Curre			10. Name and Address of New Re	gistered Agent
	PALANI, KANTA		B1 Name	C.	
	30 SW 88TH STREET		82 Street Add	dress (P.O. Box Number is Not Acceptab	ole)
MIA	MI FL 33186		83		
			63		
			84 City		FL 85 Zip Code
office or r agent. I a SIGNATURE	registered agent, or both, in the Stat im familiar with, and accept the oblig Stgnature, typed or profied name of registered ag		thorized by the corporida Statutes. Registered Agent's gnature req	rporation submits this statement for the p alion's board of directors. I hereby accep pured when reinstating!	of the appointment as registered
12.	OFFICERS AN	ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 TITLE		Change Addition
NAME	KIRPALANI, KANTA		1.2 NAME		
STREET ADDRESS	12030 SW 88TH STREET MIAMI FL		1.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	Michael F	DELETE	1.4 CHY-ST-ZIP 2.1 TITLE		Change Addition
NAME			22 NAME		2 ,
STREET ADDRESS			2.3 STREET ADDRESS		•
CITY-ST-ZIP			2.4 CITY - S1 - ZIP		
TITLE		☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY+ST+ZIP TITLE		☐ DELETE	3.4. C(TY - ST - Z(P) 4.1 THLF		Change Addition
NAME		_	4. 2 NAME		- · -
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLÉ		Change Addition
NAME			5.2 NAME		
STREET ADDRESS	•		5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE		☐ DELETE	54 CHY-ST-ZIP 61 TITLE		Change Addition
NAME			6 2 NAME		Annual Annual Print Landson
STREET ADDRESS			6.3 STREET ADDRESS		
AFFU OF THE			C 4 O(T) C1 7(D)		

44. St. ZP

14. I do hereby certify that the information supplied with this filing does not quality 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; 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. Fibrida Statutes; and that my name appears in Block 12 or Block 13 I changed, or on an attachment with an address.

CG1 - 1045 8

FILED

Apr 28 1997 8:00am

Secretary of State