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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State

1997 DIVISION OF CORPORATIONS					Secretary of State		
DOCUI 1. Corporation GRAINC	ii naine	039623 (1)					
Principal Place of Business 6743 MAIN STREET MIAMI LAKES FL 33014		Mailing Address 6743 MAIN STREET MIAMI LAKES FL 33014-2071			85  00         18   0		
					2 Data large and a Constitution	Tan Data Shanking	
					3. Date Incorporated or Qualified 05/23/1994	3a. Date of Last Report 05/01/1996	
H	lace of Business	2a. Mailing Address			4. FEI Number	Applied For	
Suite, Apt. #, etc		Suite Apt 11, etc.		65-0660740	Not Applicable  \$8.75 Additional		
22		27		5. Certificate of Status Desired	Fee Required		
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be		
Zip	Country	<b>28</b>	Country		Trust Fund Contribution  8. This corporation has liability for	Added to Fees	
24		29	30]			Yes No	
F1 A1	9. Name and Address of Current	Registered Agent	81	Name	10. Name and Address of New R	egistered Agent	
	NNAN, RABIH J 3 Main St		82				
	MI LAKE FL 33014			Street At	ddress (P.O. Box Number is Not Accepta	ible)	
			83				
			84	City		FL 85 Zip Code	
11. Pursuant	to the provisions of Sections 607.0502	and 607.1508. Florida Statutes	s, the above	e-named c	orporation submits this statement for the	purpose of changing its registered	
office or r agent. I a	<mark>egistered ag</mark> ent, or both, in the State c <mark>m familiar with, and accept the obligat</mark>	f Florida. Such change was au ions of, Section 607.0505, Flori	ithorized by ida Statutes	the corpo s.	oration's board of directors. I hereby acce	ept the appointment as registered	
SIGNATURE	Signature, typed or printed name of registined agent	and the second of the second o					
12.	OFFICERS AND		13.	or aignoure se	equired when retristionig) ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12	
TITLE			1.1 1111.6	T		Change Addition	
NAME	ELANNAN, RABIH 6743 MAIN STREET		1.2 NAME				
STREET ADDRESS CITY-ST-ZIP	MIAMI LAKES FL		1.3 STREET ADDRESS   1.4 GPY+ST-7P				
TITLE	DELETE		2.1 TITLE			Change Addition	
NAME			2.2 NAME				
STREET ADDRESS			2.3 STREET				
CITY-ST-ZIP TITLE			2 4 Cily - :	51 - 211'		Change Addition	
NAME			3.2 NAME	Ì			
STREET ADDRESS			3 3 STREET	ADDRESS			
CITY-ST-ZIP TITLE		DELETE	3.4 City - 9 4.1 Title	31 - ZiP		Change Addition	
NAME		Office	4.1 1103 4.2 NAME			C Orange C Addition	
STREET ADDRESS			4.3 STREET	ADDRESS			
CITY-ST-ZIP		Toronto	4.4 CITY - S	1- <i>2</i> 4:			
TITLE NAME		☐ DELETE	51T-HE 52 NAME			☐ Change ☐ Addition	
STREET ADDRESS			5.3 STREET	AODRESS			
CITY-ST-ZIP			5.4 CITY - S				
TITLE		DETETE	61111[[			☐ Change ☐ Addition	
STREET ADDRESS			6.2 NAME	Manorce			
STREET ADDRESS CITY-ST-ZIP			6.4 C/1Y - S				
44							

I do hereby certify that the information supplied with this filing does not quality for the exempt on stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information supplied with this filing does not quality for the exempt on 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 early 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 only attachment with an address.

GNATURE:

BASH J. FLAMBA 4/33/97 305 556-7800

SIGNATURE:

May 13 1997 8:00am