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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

Apr 15 1997 8:00am

Secretary of State

Sandra B, Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1997

SIGNATURE:

DOCUMENT # **P94000041560 (1)**

643 JEFFERSON AVENUE, INC. Principal Place of Business Mailing Address 505 12TH STREET 505 12TH STREET SUITE 10 SUITE 10 MIAMI BEACH FL 33139-4550 MIAMI BEACH FL 33139 3. Date Incorporated or Qualified 3a. Date of Last Report 08/06/1996 06/03/1994 Applied For Principal Place of Business 2a. Mailing Address 4. FEI Number 65-0498739 Not Applicable \$8.75 Additional 5. Certificate of Status Desired Fee Required City & State \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees Country 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent B & C CORPORATE SERVICES, INC. WC. 175 N.W. FIRST AVE., SUITE 2000 82 MIAMI FL 33128-9965 83 84 City inches 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered to the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered to the objection of Section 607.0505, Florida Statutes. 11. Pursuant to the provisions of 8 office or registered agent agent I am familiar with SIGNATURE (NOTE: Registered Agent signature required when reinstating) e of registered agent and title if and OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. (96/6) 13. Addition TOTLE □ DELETE 1.1 TITLE Change KAUDERER, MALLORY NAME 1.2 NAME 503 127H ST. SUITE <u> 1680 MERIDIAN AVE.; #204</u> 1.3 STREET ADDRESS STREET ADDRESS MIAMI BEACH FL 33139 1.4 CITY-ST-ZIP Addition DELETE Change 2.1 TITLE TITLE MALIS, MARC NAME 2.2 NAME 503 1274 ST. SUITE 5 1680 MERIDIAN AVE., #204 STREET ADDRESS 2.3 STREET ADDRESS MIAMI BEACH FL 33139 2.4 CITY-ST-ZIP City-St-ZIP DELETE ☐ Change Addition BILLE 3.1 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4. CITY - ST-ZIP CITY-ST-ZiP DELETE Addition Change TITLE 4.1 TITLE 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY - ST - 7IP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE 5.2 NAME NAME STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY - ST-ZIP C(1Y-\$1-2)F DELETE Addition Change TITLE 6.1 TITLE 62 NAME 6.3 STREET ADDRESS STREET ADDRESS CITY - ST - ZIF 6.4 CITY-ST-ZIP 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 annual report or supplied 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 of the c I am an officer or director of the corporation appears in Block 12 or Block 13 if chapter

nt with an address

HITTED NAME OF SIGNING OFFICER OR DIRECTOR