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PROFIT
CORPORATION
ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P9400050047 (7)

SOSA GROUP, INC.

Principal Place of Business

Mailing Address

5433 NW 59TH PL TAMARAC FL 33319 2213 E ATLANTIC BLVD POMPANO BEACH FL 33082-5209 US FILED Apr 29 1997 8:00am Secretary of State



| TAMARAC FL 33319  |   |  |                   | POMPANO BEACH FL 33082-5209<br>US |              |                |   |  | 3. Date Incorporated or Qualified 07/01/1994          |            |          | 3a. Date of Last Report 06/28/1996    |           |                                       |          |                                       |          |                             |                      |
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| 2   | #, CIC  |  |                   | 27                                | ulie, Apt. # | , etc.         | _   |  |   |            | 5, 0     | Certifice                             | te of Sta | atus De                               | sired    |                                       |          | •                           | Additiona<br>equired |
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|   | TON, FRANK  |  |                   |                                   |              |                |   | 81   | Name  |            |          |                                       |           |                                       |          |                                       |          |                             |                      |
|   | W SAMPLE  |  |                   |                                   |              |                |   | 82   | Street  | Addres     | s (P.0   | D. Box I                              | Number    | is Not                                | Accept   | able)                                 |          |                             |                      |
| COR   | VAL SPRINGS   | FL 33065   |                   |                                   |              |                |   | 83   |   |            |          |                                       |           |                                       |          | · · · · · · · · · · · · · · · · · · · |          |                             |                      |
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| HELE<br>NAME<br>STREET ADDRESS<br>DITTES<br>TITLE   | 5433 NW 5<br>TAMARAC I  | 9TH PL<br>FL 33319   |                   |                                   | D            | ·····          | 1.1 To<br>1.2 N<br>1.3 S<br>1.4 C   | IAME<br>TREET AC<br>ITY-ST-1   |   |            | - 19     | <u> </u>                              |           |                                       |          | <i>ioeng</i>                          | L        | Change                      | Add                  |
| TELE<br>NAME<br>STREET ADDRESS<br>DET - ST-ZIP<br>DELF<br>NAME  | 5433 NW 5<br>TAMARAC I<br>D<br>SOSA, SAN<br>5433 NW 5   | 9TH PL<br>FL 33319<br>IMY<br>9TH PL                                |                   |                                   | D            | ·····          | 1.1 To<br>1.2 N<br>1.3 S<br>1.4 C<br>2.1 To<br>2.2 N  | IAME<br>TREET AC<br>ITY-ST-1   | ZIP   |            |          | <u> </u>                              |           |                                       |          | <i>ioena</i>                          | L        | Change                      | Add                  |
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Tam 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 a attachment with an address.

SIGNATURE

NTED NAME OF SIGNING OFFICER OR DIRECT

CHASIC

4/23/97 954-796-2099