FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

| FLORID incipal Place of 16830 SW 233 MIAMI FL 331 | 2 ST | Maling Address 16830 SW 232 ST MIAMI FL 33170 | | | | | | |
|--|--|--|--|---|---|---------------------|--|--|
| | | | | | 3. Date Incorporated or Qualified 08/09/1994 | | te of Last Re 05/01/199 | |
| Principal Pla | ce of Business | 2a. Mailing Address | | | 4. FEI Number | | A | Applied For |
| · | | 26 | | | 65-0514159 | | | Not Applicable |
| Suite, Apt. # | , etc. | Suite, Apt. #, etc. | | | 5. Certificate of Status Desired | | | Additional Required |
| City & State | | City & State | | | 6. Flection Campaign Financing | | | May Be |
| , | | 28 | | | Trust Fund Contribution | | Added | to Fees |
| Z (p) | Country | Zφ | Countr | у | 8. This corporation has liability for | | tax under s | 199.032, |
| | [25] | 29 | [30] | | Florida Statutes Ye 10. Name and Address of New | s □No Registered | 1 Agent | |
| | g. Name and Address of Curre | ent Registered Agent | 8 | 1 Name | 10. Name and Address of New | .seAistelec | Ageill | |
| COLICIN | S. ROSE-ANNE | | | | | | | |
| | | | 8 | 2 Street Add | iress (P.O. Box Number is Not Accepta | hile) | | |
| 16830 SW 232 ST MIAMI FL 33170 | | | 8: | 3 | | | | |
| *********** | L 00110 | | 8 | 4 City | | | . 85 Zip | Code |
| | h, and accept the obligations of, Se | ctori 607.0505, Florida Statuti | rozen 1 fest felev filt a | poration's boa | ration submits this statement for the praid of directors. The eby accept the ap | pointment a | as registered | agistered oni agent. I am |
| Z. | SujraCia 1,144 or poole Trace of resident and OF1 ICEHS A D COUSINS, PATRICK E. G | ction 607.0505, Florida Statuti | rozen 1 fest felev filt a | poration s box | ard or directors. Thickey, accept the ap | DATE | is registered | |
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14. Units 1-air.

14. If do hereby certify that the information supplied with this filing is voluntarily formshod and does not qualify for the exemption stated in Saction 119.07(3)(k). 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 cath, that I am an office or directly of the corporation or the receiver or busted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block or on an attachment with an address.

6.3 STREET ADDRESS

64 CHY+ST-ZIP

ROSO - ANNE COUSIS SIGNATURE: PHOUSING.

STREET ADDRESS

29# april 96 305 2476627