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

DOCUMENT # P9400062108 (3)

ESCORT SOUTH PORT, INC.

	:SUUN I	1 300111	runi, inc.										
Princ	cipa: Place	e of Busines	5		Mailing Address						UUU URAFU BUFU	E ILDUI INDIA ADIO	A 1914 (99)
14200 SW 74TH ST MIAMI FL 33183					14200 SW 74TH ST MIAMI FL 33183-2955								
										Date Incorporated or Qualified 08/23/1994	1	ate of Last R /25/1996	eport
	Principal Pr	tabe of Busin	eess		Mailing AddreI	ess			4.	FEI Number		<u> </u>	oplied For
Suite, Apt. #, etc.					Suite, Apt. #, etc.				+	65-0513836		\$8.75	t Applicable
22					27			5.	Certificate of Status Desired		Fee Re		
City & State 23				28	City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Z	' (p)		Country		Zip n	\vdash	untry	/	8.	This corporation has liability for			. 199.032,
24			25 and Address of	29	_	30				Florida Statutes Name and Address of New F	Yes		
				Cuitant Lah	listered Agent		81	Name	10.	Raine allu Addiess Ol Rew I	ie Bistered	Maur	
		RIOLO, FR					-						
14200 SW 74TH ST MIAMI FL 33183							82	Street Address (P.O. Box Number is Not Acceptable)					
							83						
							84	City			FL	85 Zip (Code
11.	Pursuant	to the provis	ons of Sections 6	07 0502 and	607.1508, Florid	a Statutes, the	abovi	e-named corp	ooratio	on submits this statement for the			s registered
	office or r agent. La	egistered ag im familiar wi	ent, or both, in th th, and accept th	e State of Flo e obligations	of, Section 607.0	je was authorizi 1505. Florida Sta	ed by atute:	y the corporat s.	tion's t	on submits this statement for the board of directors. I hereby acc	ept the ap	pointment as	registered
SIGI	NATURE:												
10		Stgr. £ in , typed	or purbed Lame of rega					eni signature requi		n reinstating) ADDITIONS/CHANGES TO OFF	DATE	D DIDECTOR	0.01.10
12.		D	OFFICE	RS AND DIR	ECTORS DEL	FTF 11.	TITLE			ADDITIONS/CHANGES TO OFF	ICERS AN	Change	S IN 12 Addition
NAME		_	O, FRANK				NAME					Circuide	ויטוווטטא נ
	ET AODRESS		SW 74TH ST					T ADDRESS					
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CITY-	-S1 - 70°	,			☐ DEL		CITY - : TITLE	ST-ZIP		***************************************		Change	Addition
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CHY	ST ZIF	,			····		CITY - S	ST - ZIP				·· •	
DIF					∐ DEL		TITLE	1				Change	L Addition
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1	ET ADDRESS	l İ				l.		TADDRESS					
	-ST-ZP Ldo herel	by cert ly tha	Libe information :	supplied with	this filma does n			ST-ZIP emption stated	d in Se	ection 119.07(3)(i), Florida Statu	tes. I furthe	er certify that	the
										ignature shall have the same le equired by Chapter 607, Florida			

SIGNATURE:

THOUSE THE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

12/16/97

FILED

Feb 20 1997 8:00am

Secretary of State