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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Apr 21 1997 8:00am

Secretary of State

Sandra B. Mortham

Socretary of State DIVISION OF CORPORATIONS

DOCUMENT # POACOCCEAAAC (8)

Principal Place of Business Mailing Address 2315 NW 107TH AVE. MiAMI FL 33172 15 OF POOR 15 OF								
		N MIAMI BCH FL 33162-3	403		3. Date Incorporated or Qualified		e of Last R	eporl
6 Principal D	lines of Rusiness	2a. Mailing Address			08/29/1994 4. FEI Number	05/0	1/1996	
2. Principal Place of Business 21		26 26			65-0518641			plied For ot Applicable
Sulte, Apt. #, etc.		Suite, Apt. #, etc.		5 Contificate of Status Desired Status Program Status Desired				
22		27		5. Certificate of Status Desired	L	Fee Re	·	
City & State		City & State		6. Election Campaign Financing	F-13	\$5.00		
23 Zip	Country	7 _(p)	Country	, ,	Trust Fund Contribution	r inlangible f	Added t	
4 25		29 30			8. This corporation has liability for inlangible tax under s. 199.032, Florida Statutes XXX Yos No			
	g, Name and Address of Current	Registered Agent		1	10. Name and Address of New I	Registered A	gent	
BEN-SHMUEL, LIOR			81	Name				
152 NE 167TH ST.			82 Street Ac		dress (P.O. Box Number is Not Accept	able)	· · · · · · · · · · · · · · · · · · ·	
) FLOOR NAMI BCH. FL 33162		83					
14. 11	IIIANI DON. PL 00102		100				11	
			84	City		FL	1 1 1	Dode
agent. I a SIGNATURE	to the provisions of Sections 697.0502 egistered agent, or both, in the State of im familiar with, and accept the obligation Signature, typed or printed name of registered agent OFFICE RS ANO	ano ulc il applical lo (NO			uired who reinstating? ADDITIONS/CHANGES TO OFF	DATE		
TITLE	D DELETE		1.1 TOLE				Change	Addition
NAME - 1	BEN-SHMUEL, LIOR		1.2 NAME					}
STREET ADDRESS	152 NE 167TH ST. 2ND FLOOR		1.3 STREET ADDRESS					
CITY-ST-ZIP TITLE	N MIAMI BEACH FL 33162	DELETÉ	1.4 CHY- S1- ZIP 2.1 TITLE				Change	Addition
NAME	D BEN-SHMUEL, ISAG IZAC		2.2 NAME				Ullange	□ Montion
STREET ADDRESS	152 NE 167TH ST. 2ND FLOOR		2.3 STREET ADDRESS					ĺ
CITY-ST-ZIP	N MIAMI BEACH FL 33162		2.4 CHY-5	\$1 - ZIP				
TITLE	The state of the s		31 117(Change	Addition
NAME	DEN OTHER DESCRIPTION		3.2 NAME					
STREET ADDRESS	152 NE 167TH ST. 2ND FLOOR N MIAMI BEACH FL 33162		3.3 STREET	· 1				}
CITY-ST-ZIP TITLE	DELETE		34. CITY- 5	S1 - ZIP			Change	Addition
NAME			4. 2 NAME					
STREET ADDRESS			4.3 S1R5E1	ADDRESS				}
CITY-ST-ZIP			4.4 CITY-S	T- 2)P				
TITLE	•		511111.1	ŀ		i	Change	Addition
NAME ADDOCOS			5.2 NAME	IDDD/C:				
STREET ADDRESS CITY-ST-ZIP			53STREET	, i				
TITLE	DELFIE		5.4 CITY - S 6.1 TITLE	1. 711		<u></u>	Change	Addition
NAME		-	62 NAME	1			5	_
STREET ADDRESS			6.3 STREET	ADDRESS				

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 indicator 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 eath; 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 on an attachment with an address.