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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

1. Corporation Name

P94000068662 (3)

DOCUMENT # TOEND OOD INC

	I KENU 22U, II	V C.						 	
F	Principal Place of Busines	s	Mailing Address			- I JOSTILOĞU INÐ LONIN BURNT OÐINT OÐINT OÐINT	TOTAL DAILE (inge gener brind byref fille 1961	
9380 S.W. 72 STREET SUITE B 165 MIAMI FL 33173			9380 S.W. 72 STREET Suite B 165 Miami Fl 33173						
L	B: 18					3. Date Incorporated or Qualified 09/19/1994		3a. Date of Last Report 04/27/1995	
21		4 Court	2a. Mailing Address 26 8010 SW 94	Coi	ırt	4. FEI Number 65-0520507		Applied For Not Applicable	
Suite, Apt. #, etc.			Suite, Apt. #, etc.			5. Certificate of Status Desired		\$9.75	
23			City & State 28 Miami, FL			Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees	
24		Country 25 Dade	29 33173 30	Country I	ade	8. This corporation has liability for in Florida Statutes 🔀 Yes	ntangible t		
<u> </u>	9. Name	and Address of Curre	nt Registered Agent			10. Name and Address of New R		Agent	
	HUNT, CHRISTINE 80100 S.W. 94 C 343 ALMERIA AVE MIAMI FL 33173	OURT		81 82 83		ess (P.O. Box Number is Not Acceptabl			
				"	Joney		FL	85 Zip Code	

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office

	Signature introduced or printed harve of registered agent and title if applicable. OFFICERS AND DIRECTORS	TOM	E. Ragistered Agent signature required	
E		ELE1E	19.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
- Mt	HUNT, CHRISTINE C	ELE IE	1. 1 TITLE	☐ Change ☐ Addition
ELT ADDRESS	9380 S.W. 72 STREET, SUITE B 165		12 NAME	
	MIAMI FL 33173		1.3 STREET ADDRESS	
· ST-ZIP			1.4 CiTY - ST - ZiP	
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EET ADDRESS			2.3 STREET ADDRESS	
'- ST- ZIP	· · · · · · · · · · · · · · · · · · ·		2.4 CITY - ST - ZIP	
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-ST-7/P			3.4 CITY-ST-ZIP	
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- S1 - ZIP			4.4 CITY - ST - ZIP	
	DA	ELETE	5 1 TITLE	Change Addition
:			5.2 NAME	Onlings Addition
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-SI-ZIP			5.4 CITY-ST-ZIP	
	ID [7]	ELETE	6 1 TITLE	[Ch [1200.
;			6.2 NAME	Change Addition
FT ADDRESS				
-SI-ZIP			6.3 STREET ADDRESS	

I do hereby certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 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 oath; 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.

SIGNATURE:

Liestine Hunt 4-23-96 605)596-9009

ATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR