## 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

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DOCUMENT #	P94000071928 (	3

NORMAN CIMENT, ESQ., P.A.

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Carly & Status							65-0532312			····	
Clay   State		#, etc	<u>├</u>				5. Certificate of Status Desired				
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CIMENT, NORMAN 407 LINCOLN RD SUITE 597 10-4 MIAMI BEACH FL 33139  11. Pursuant to the provisions of Soctions 607 0502 and 607 1508, Florida Statutes, the above named corporation submits this statement for the purpose of sharping its registered discorpt the colligions of Societies 607 0502 and 607 1508, Florida Statutes, the above named corporation submits this statement for the purpose of sharping its registered office or registered agent, or both, in rine State of Florida Statutes, the above named corporation's board of directors. I thereby accept the appointment as registered office or registered agent, or both, in rine State of Florida Statutes, the above named corporation's board of directors. I thereby accept the appointment as registered office or registered agent almost with, and accept the collegement of the purpose of sharping its registered of the corporation's board of directors. I thereby accept the appointment as registered of the corporation's board of directors. I thereby accept the appointment as registered of the corporation's board of directors. I thereby accept the appointment as registered of the corporation's board of directors. I thereby accept the appointment as registered of the corporation's board of directors. I thereby accept the appointment as registered of the corporation's board of directors. I thereby accept the appointment as registered of the corporation's board of directors. I thereby accept the appointment as registered of the corporation's board of directors. I thereby accept the appointment as registered of the corporation's board of directors. I thereby accept the appointment as registered of the corporation's board of directors. I thereby accept the appointment as registered of the corporation's board of directors. I thereby accept the appointment as registered and the corporation's board of directors. I thereby accept the appointment as registered and the corporation's board of directors. I thereby accept the corporation's board of directors. I thereby accept the corpora		<u>├</u>	<b>}</b> —¬		•					3. 155.002,	
LINEARLY INCOMINED  SURTE 1897 10.4  MAMI BEACH FL 33139  83  64 City  FL 85 Zip Code  11. Pursuant to the provisions of Socions 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing lis registered agent, or both, in the State of Florida, Such charge was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the clipications of Sociologned 70 5005, Florida Statutes, the above-named corporation submits this statement for the purpose of changing lis registered agent. In almiania with, and chosept the clipications of Sociologned 3 florida Statutes are provided when minutery.  SIGNATURE  SIGNATURE  OF FICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS In 12.  INTE  OFFICERS AND DIRECTORS  12. WAVE  14 City  FL 85 Zip Code  14 City  FL 85 Zip Code  15 ADITIONS/CHANGES TO OFFICERS AND DIRECTORS In 12.  ADITIONS/CHANGES TO OFFICERS AND DIRECTORS In 12.  INTE  OFFICERS AND DIRECTORS  15 STREET ADDRESS  2 CITY-ST-2P  THE  OFFICERS AND DIRECTORS  2 SINRET ADDRESS  2 CITY-ST-2P  THE OFFICERS AND DIRECTORS  3 SINRET ADDRESS  2 CITY-ST-2P  OFFICERS AND DIRECTORS  3 SINRET ADDRESS  2 CITY-ST-2P  THE OFFICERS AND DIRECTORS  3 SINRET ADDRESS  2 CITY-ST-2P  THE OFFICERS AND DIRECTORS  3 SINRET ADDRESS  2 CITY-ST-2P  THE OFFICERS AND DIRECTORS  3 SINRET ADDRESS  2 CITY-ST-2P  THE OFFICERS AND DIRECTORS  3 SINRET ADDRESS  2 CITY-ST-2P  THE OFFICERS AND DIRECTORS  3 SINRET ADDRESS  3 SINRET ADDRESS  CITY-ST-2P  THE OFFICERS AND DIRECTORS  3 SINRET ADDRESS  3 SINRET ADDRESS  3 SINRET ADDRESS  4 CITY-ST-2P  THE OFFICERS AND DIRECTORS  3 SINRET ADDRESS  4 CITY-ST-2P  THE OFFICERS AND DIRECTORS  3 SINRET ADDRESS  4 CITY-ST-2P  THE OFFICERS AND DIRECTORS  4 CITY-ST-2P  THE OFFICERS AND							10. Name and Address of New Reg	platered A	gent		
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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 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; the	14 I do here	hy certify that the information supp	hed with this films does not qualif	v for the ex	(Ar	motion states	d in Section 119.07(3)(i) Florida Statute	s. I further	certify th	at the	

SIGNATURE:

IGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/10/97

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**FILED** 

Jan 22 1997 8:00am

Secretary of State

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