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

PROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUN 1. Corporation	MENT # P940 (00080426 (7)		
CORAL	. WAY PARTNERS, INC.			# #40011840 F10 10F14 01011 00F11 #011	: Baile Baiai Jain Bail Bail Bhain (1868 Blin iabh
Principal Place	of Business	Mailing Address			
8220 SW 52 AVENUE 8220 SW 52 AVENUE MIAMI FL 33143 MIAMI FL 33143 US US			1		
00		00		3. Date incorporated or Qualified 11/02/1994	3a. Date of Last Report 07/10/1995
2. Principal Pla	ce of Business	2a. Mailing Address 26		4, FEI Nuniber	Applied For
Suite, Apt. #	, etc.	Suite, Apt. #, etc.		65-0534829 5. Certificate of Status Desired	Not Applicable \$8.75 Additional
2 27 City & State		City & State			Fee Required
3		28		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zp 	Country 25	Ζιρ 29	Country 30	8. This corporation has liability for i	
.J	9. Name and Address of Curre			10. Name and Address of New R	-
			81 Name		
PAIGE, ROBERT E ESQ			82 Street Ad	dress (P.O. Box Number is Not Acceptable)	
2151 LE JEUNE RD SUITE 309-A CORAL GABLES FL 33134			83		w
COIVIL			84 City		leel 7. Code
				oration submits this statement for the pur	FL 85 Zip Code
IGNATURE _	n, and accept the obligations of, Sec	nt and the it annicable (N	OTE Registered Agold signature requi	· · · · · · · · · · · · · · · · · · ·	DATE
2. IILE	D OFFICERS AN	ND DIRECTORS DELFTE	13.	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12 Change Addition
AME	COLSKY, ARTHUR S		1.2 NAME		
IREE1 ADDRESS	8220 SW 52 AVENUE		1.3 STREET ADDRESS		
TY-ST-ZIP	MIAMI FL D	DELETE	1.4 CITY - \$T - ZIP		
AME	COLSKY, ANDREW E		2 1 TILE 2 2 NAME		Change Addition
REE1 ADDRESS	8220 SW 52 AVENUE		2.3 S!REHT ADDRESS		
TY-S1-ZIP	MIAMI FL		2.4 CITY-ST-ZIP		
TLE	D	☐ DELFTE	3 1]]][[Change Addition
AME	COLSKY, OZER L 8220 SW 52 AVENUE		. 3.2 NAME		
REF1 ADDRESS 1Y+S1-ZIP	MIAMI FL		33 STREET ADDRESS		
LF.	D	DELETE	34 CHY+ST+ZIP 4 1 TITLE		Change Addition
ME	COLSKY, OSCAR		4.2 NAME		- g
REET ADDRESS	8220 SW 52 AVENUE		4.3 \$1HEEL ADDRESS		
TY-S1-ZIP	MIAMI FL		4.4 CITY - S1 - ZIP		
LE		☐ DEFE1F	5 1 TITLE		Change Addition
ME REFT ADDRESS			5 2 NAME		
TY-S1-ZIP			5.3 STHEET ADDRESS : 5.4 City-SF-Zip		
LE LE		☐ DELETE	6 1 TITLE		Change Addition
ME			6.2 NAME		<u> </u>
REET ADDRESS			6.3 STHEFT ADDRESS		
TY-ST-ZIP			64 CITY - ST - 7IP		
certify that to oath; that I a	he information indicated on this ann	ual report or supplemental and pration or the receiver or trusto	ival report is true and accur re empowered to execute th	for the exemption stated in Section 119.0 rate and that my signature shall have the s ris report as required by Chapter 607, Flo	campo local afford on if made under

SIGNATURE: Aber College Andrew College as Director

1/16/96 (305)665-2493