## 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

**DOCUMENT #** 

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-	I JIKII JA	LANINEL	ING.

Mailing Address Principal Place of Business 2061 S.W. 70TH AVE. #F12/13 2061 S.W. 70TH AVE. #F12/13 **DAVIE FL 33317** DAVIE FL 33317 3. Date incorporated or Qualified 3a. Date of Last Report 11/07/1994 4. FEI Number 07/27/1995 2a. Mailing Address 2. Principal Place of Business 26 21 65-0531621 Suite, Apt. #, etc. \$8.75 Additional Suite, Apt. #, etc. 5. Certificate of Status Desired 22

Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 28 23 8. This corporation has liability for intangible tax under s 199.032, Ζφ Country Yes No 29 30 Florida Statutes 24 25 Name and Address of New Registered Agent Name and Address of Current Registered Agent

THURSTON, ROGER 2161 SW 35TH AVENUE FT LAUDERDALE FL 33312

	10. Hamo and Addides of them ringing or Agent					
81	Name					
82	Street Address (P.O. Box Number is Not Acceptable)					
83						
84	City	FI	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 or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

	Signature, typed or printed name of registered agent and litle if applica		E: Registered Agent signature required		
12.	OFFICERS AND DIRECTOR		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTO	
TITLE	D	DELETE	1. 1 TITLE	☐ Change	Addition
NAME	THURSTON, ROGER		1.2 NAME		
STREET ADDRESS	2161 SW 35TH AVENUE		1.3 STREET ADDRESS		
CHY-ST-ZP	FT LAUDERDALE FL 33312		1.4 CITY - ST - ZIP		
TITLE	D	DELETE	2 1 TITLE	Change	Addition
NAME	ST JEAN, JEAN-LOUIS		2 2 NAME		
STREET ADDRESS	1285 SW 117 WAY #90		2.3 STREET ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE FL 33325		2 4 CITY - ST - ZIP		<u></u>
TITLE		DELETE	3. 1 TITLE	Change	☐ Addition
NAME			3 2 NAME		
STREET ADDRESS			3.3. STREET ADDRESS		
CITY - ST - ZIP			3 4 CITY-ST-ZIP		
TITLE		☐ DELETE	4 1 TITLE	☐ Change	Addition
NAME			4 2 NAME		
STREET ADDRESS			4 3 STREET ADDRESS		
CITY - ST-ZIP			4 4 CITY-ST-ZIP		
TITLE		□ DELETE.	5.1 TITL€	Change	☐ Addition
NAME			5 2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
CITY-ST-ZIP			5.4 City-St-ZIP		
THILE		DELETE:	6 1 TITLE	☐ Change	■ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY - ST - ZIP			64 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing 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 arı attachment with an address.

CER OR DIRECTOR

04/18/1996 (954)452-0205

Applied For

Not Applicable