## 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

Principal Place of Business  19120 NW 5TH COURT MIAMI FL 33169  Mailing Address  19120 NW 5TH COURT MIAMI FL 33169							
					3. Date Incorporated or Qualified 11/23/1994	3a. Date of Las 08/07/199	
<u> </u>	Place of Business	2a. Mairing Address	··· •·		4. FEI Number		Applied For
<del></del>		26			65-0571463		Not Applicable
22 27		Suite, Apt. #, etc.	¬ ' '		5. Certificate of Status Desired		5 Additional Required
City & State		City & State			6. Election Campaign Financing		00 May Be
23		28			Trust Fund Contribution		ed to Fees
Zip	Country	Zip	Country		8. This corporation has liability for		er s. 199.032,
24	25 9. Name and Address of Currer	29	30		Florida Statutes  10. Name and Address of New Re	Yes No	<del></del>
OID		it uadistated Wanit	81 Na	me	10. Name and Address of New Re	igisteren Agent	
GIBSON, ANNETTE 19120 NW 5TH COURT			<b> </b>		(0.0 b) (1.1 b) (1.1 b)		
MIAMI FL 33169			82 Str	eet Addre:	ss (P.O. Box Number is Not Acceptat	)(OIC)	
			83				
			B4 Cit			85 Z	Zip Code
<u> </u>				·		FL	
office or r agent. I a SIGNATURE	registered agont, or both, in the State im familiar with, and accept the obliging	of Florida. Such change was ations of, Section 607.0505, FI	authorized by the orida Statutes.  E. Registered Agent sign	corporatio	ration submits this statement for the policy board of directors. I hereby accept twhen reinstating;	pt the appointment	as registered
12.	OFFICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFIC		
TITLE	D SIDOON AND ETTE	L. DELETE	1.1 TITLE			∟ Chang	ge L Addition
NAME .	GIBSON, ANNETTE 19120 NW 5TH COURT		1.2 NAME				
STREET ADDRESS	MIAMI FL 33169		1.3 STREET ADOR	ESS			
CITY-ST-ZIP TITLE	D	DELETE	1.4 CITY-ST-ZIP 2.1 TITLE			[] Chang	ge Addition
NAME	GIBŞON, CAROL		22 NAME				
STREET ADDRESS	19120 NW 5TH COURT		23 STREET ADDR	ESS			
CITY-ST-ZIP	MIAMI FL 33169		2. 4 CITY - ST - ZIF	·			
TITLE	D	☐ DELETË	3.1 TITLE			Chang	ge 🔲 Addition
NAME	BRAMWELL, ATTL		3.2 NAME				
STREET ADDRESS	19120 NW 5TH COURT		3.3 STREET ADDR	ļ			
CITY-ST-ZIP	MIAMI FL 33169	□ DELFTE	3.4. CITY - ST - ZIP			Chang	ge Addition
TITLE NAME		בַ ענוונ	4.1 TITLE 4.2 NAME			L Criant	je 🗀 Addition
STREET ADDRESS			4.3 STREET ADOR	125			
CITY-ST-ZIP			4.4 CITY - ST - ZIP	100			
TITLE		DELETE	5.1 TITLE			Chang	ge Addition
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREET ADDR	ESS			
CITY-ST-ZIP			5.4 C(1) - S1 - Z(P				
TITLE		☐ DELE1E	6.1 TITLE			L_ Chang	ge L Addition
NAME OTRETT ADDRESS			6.2 NAME				
STREET ADDRESS			6.3 STREET ADDR	:55			

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; 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.

CITY-ST-ZXP

**FILED** 

Apr 25 1997 8:00am

Secretary of State