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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT # P9400091576 (6)

Principal Place of Business Mailing Addréss 8082 SW 80 AVE 8082 SW 90 AVE MIAMI FL 33173 MIAMI FL 33173-4100							
				3. Date Incorporated or Qualified 12/19/1994		e of Last F 2/1996	Report
2. Principa P	lace of Business	2a, Mailing Address		4. FEI Number		 _	polied For
21		26		65-0549866			ot Applicable
Suite, Apt	#, elc.	Suite, Apt #, etc.		5. Certificate of Status Desired			Additional
22 City & State		City & State					equired
23	y	28		Election Campaign Financing Trust Fund Contribution			May Be to Fees
Zip	Country	Zip	Country	8. This corporation has liability for it			
24	25	29	30	Florida Statutes	Yes 🔲	No	
	9, Name and Address of Curren	nt Registered Agent		10. Name and Address of New Re	gistered A	gent	
	SELL, IBRAHIM Q		81 Name				
	CRANDON BLVD BISCAYNE FL 33149		82 Street Add	dress (P.O. Box Number is Not Acceptab	ole)		
NEI	DISCATINE FL 33148		83				
			84 City		FL	85 Zip	Code
office or r agent. La	egistered agent, or both, in the State m familiar with, and accept the obliga-	e of Florida. Such change was ations of, Section 607.0505, I	s authorized by the corpora Florida Statutes.	rporation submits this statement for the pation's board of directors. I hereby accept	bt trie appoi	and the same	• • • • • • • • • • • • • • • • • • • •
SIGNATURE	Stynuture, typica or printed name of registered age OFFICERS AN	ent and title if applicable (NO	OTE: Registered Agent signature requ		DATE CERS AND I	DIRECTO	RS IN 12
SIGNATURE 12. Title	Skynusure typical or printed narroe of registered age OFFICERS AN	ent and title if applicable (NC	OTE: Registered Agent signature requirements 13.	uirad when reinstating)	DATE CERS AND I		
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SIGNATURE:

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/97 305-36/0504 Date Dept.me Prone !

FILED

May 07 1997 8:00am

Secretary of State