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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996 **DOCUMENT #**

P94000093390 (0)

SURE WINNERS	ENTERPRISES.	INC.
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Mailing Address Principal Place of Business 6550 GRIFFIN RD 12144 SOUTHWEST 50 STREET COOPER CITY FL 33330 **UNIT 106** 3a. Date of Last Report DAVIE FL 33314 3. Date Incorporated or Qualified 05/01/1995 U\$ 12/28/1994 Applied For 4. FEI Number 2a. Mailing Address 2. Principal Place of Business Not Applicable 65-0536615 26 21 \$8.75 Additional Suite, Apt #, etc. 5. Certificate of Status Desired Suite, Apt. #, etc. Fee Required 22 \$5.00 May Be 6. Election Campaign Financing City & State City & State Added to Fees Trust Fund Contribution 28 8. This corporation has liability for intangible tax under s 199.032, Florida Statutes Yes No 23 Country Ζφ Country Zιρ 30 29 25 10. Name and Address of New Registered Agent 24 Name and Address of Current Registered Agent 81 Street Address (P.O. Box Number is Not Acceptable) 82 **AMERILAWYER** 343 ALMERIA AVENUE 83 **CORAL GABLES FL 33134** Zip Code 84 City FL

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 ancept the appointment as registered agent. I am

	OFFICERS AND DIVEC	1OFIS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	DELETE	1 STATLE	Change Addition
VAME	GRAFF, EDWARD H		1 2 NAME	
THEET ADDRESS	12144 SOUTHWEST 50 STREET		1.3 STREET ADDRESS	
1	COOPER CITY FL 33330		1.4 CHY+ST-ZIF	Change Addition
ITY-ST-ZIP	S	DELETE	2 1 TITLÉ	Change Add-tion
IAME	GRAFF, BARBARA		22 NAME	
1	12144 SW 50 ST		2.3 STREET ADDRESS	
STREET ADDRESS	COOPER CITY FL.		2 4 CITY - ST · ZIP	Change Addition
CITY-ST-ZIP	TV	DELETE	3 1 TATLE	Change Addition
NAME	GRAFF, TODD G		3 2 NAME	
	12144 SW 50TH ST		3.3 STREET ADDRESS	
STREET ADDRESS	COOPER CITY FL		3.4 CHTY - ST - ZIP	Change Add-tio
CITY - ST - ZIP TITLE	C	DELETE	4, 1 TITLE	Change Addition
	REWERS, LEONARD J		4.2 NAME	
NAME	6550 GRIFFIN RD SUITE 106		4.3 STREET ADURESS	
STREET ADDRESS	DAVIE FL		4.4 City-St - Z:P	Additio
CITY-ST-ZIP TITLE	C	DELETE	5 1 HilE	50000018U8293° 5
-	MCA, LTD AN ILLINOI		5 2 NAME	-05/06/9601017010
NAME	6550 GRIFFIN RD SUITE 106		5.3 STREET ADORESS	***200.00
STREET ADDRESS	DAVIE FL		5.4 CITY - ST - ZIP	$(1 \mathcal{Q})$
CITY - SI - ZIP	C	DELETE	6 1 TITLE	☐ Crangel ☐ Addition
TITLE	•	*	6.2 NAME	m' ~
NAME	RCMA, LTD A 6550 GRIFFIN RD SUITE 106		6.3 STREET ADDRESS	1 .()
STREET ADDRESS				

14. Ido 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 certify 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.

SIGNATURE:

FICER OR DIRECTOR