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

PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

· · ·	11 REPORT		DIVI	Secretary of SION OF COF		VS				
DOCUM I, Corporation Na	ENT#	P95000	0002182	2 (0)						
GODLEE	TIKAS, CORP	,								
Principal Place of	Business		Mailing Address	ss		-,	) (O#1400) (10 1010) (11 1010) (11 1011)		##:4# 11 <b>3</b> #: 11 <b>3</b> #	1 18119 1181 1881
7171 CORAL WAY SIE 104 MMMI FL 38155			1977 CORAL WAY STE- TOT MIAMI FL 38195							
$\times$							<ol> <li>Date Incorporated or Quali 01/10/1995</li> </ol>	ified <b>3a</b> . Da	ate of Last R	
. Principal Place		. (1)	2a. Mailing Add	dress	ME		4. FEI Number 65-0287	200		Applied For Not Applicable
805		c way	Suite, Apt.				1 "			Additional
Suite, Apt. #, e	etc.	•	27	W, OIC.			5. Certificate of Status Desire	ed 🔲		Required
City & Style  (1) 1 AM 1 FC 28			City & State	City & State			6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees			
Zip -	Cou	ntry,	Zip	***	Country		8. This corporation has liabilit	y for intangible	tax under s	199.032,
33/3	<b>7</b> 🕽 25 (	154	29	30	0		Florida Statutes 10 Name and Address of N	Yes No	d Agent	
	9. Name and Ad	press of Current	Registered Agen	IL	81	Name	10. Name and Address of the	ich flegistere	u Agont	
LEE, ROGELIO					82		ress (P.O. Box Number is Not Acc	ceptable)		
7900 SW	139TH TERRACE	E			83				• • • • • • • • • • • • • • • • • • • •	
	33158									
MIAMI FL	••••								.  85   Zi	p Code
MIAMI FL  11. Pursuant to 1 or registered	the provisions of Se	the State of Florid	la. Such change wa	as authorized f	the above-n	City amed corpor oration's boar	ration submits this statement for th rd of directors. I hereby accept the	he purpose of ce appointment	Changing its	registered office agent. I am
MIAMI FL  11. Pursuant to 1 or registered familiar with, SIGNATURE		the State of Florid Ingalions of, Section	ia. Such change wa on 607,0505, Florid and the Pappleable	as authorized t la Statutes.	the above-n by the corpo	amed corpor oration's boar	ration submits this statement for the ration submits this statement for the ratio of directors. I hereby accept the ratio of directors. I hereby accept the ratio of directors of the ratio	he purpose of c e appointment DATE	changing its las registered	DRS IN 12
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SONATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-23-96 261-3834