ANN	PRPORATION NUAL REPORT 1996			LORIDA DEPARTM Sandra B. M Secretary of DIVISION OF COR	ortham I State			
. Corporati	JMENT # F on Name IX HORIZONS,	9500 INC.	0000	3239	7			
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	GABLES, FL 3	33134		GABLES, F	L 33134	JANUARY 12,199	.	Last Report
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Suite, Apt	. #, etc.		Suite, A	pt. #, etc.		65-0550937 S. Certificate of Status Desired	П	Not Applicat \$8.75 Additional
City & Sta	te		27 City & S	itate		<u> </u>		Fee Required
Zio	1 - 7	to:	28			Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees
<u> </u>	25 9. Name and Addr		Zip 29	30	Country	8. This corporation has liability for Florida Statutes	es ∐No	
PORERT	r vinas	COO OI CONTON	egistered Ap		81 Name	10. Name and Address of New	Registered Age	ent
	PONCE DE LEON	BLVD.		•	\$2 Street Add	tress (P.O. Box Number is Not Accept	able)	
SUITE	300							
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