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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham
Secretary of State

1996 DIVISION OF CORPORATIONS

						-		
_	_	-			-			
	٦.	7	. ,,	١,	11	- №	1T	ш
1 1	,	1 .1		W	15	- 11	M I	44
	_	_	\sim				•	

P95000010060 (8)

FOUNDATION INVESTORS GROUP, INC.

Principal Place o	of Business	Mailing Address				T FRONTION THE ISSUE SHALL WALLE OF			80118 81111 8811 188 1
2206 HOLLYWOOD BLVD. HOLLYWOOD FL 33020		2206 HOLLYWOOD BLVD. HOLLYWOOD FL 33020							
		·· • · · · · · · · · · · · · · · · · ·				3. Date Incorporated or Qualified 02/07/1995	3a. Date	of Last F	Report
2. Principal Plac	ne of Business	2a. Mailing Address				4. FEI Number			Applied For
21]		26				65-0567548			Not Applicable
Suite, Apt. #	, etc.	Suite, Apt. #, etc				5. Certificate of Status Desired		Fee	5 Additional Required
City & State		City & State				6. Election Campaign Financing Trust Fund Contribution			00 May Be led to Fees
Zip)	Country 1221	Zip	Country			8. This corporation has liability for i		k under s	s 199.032,
24	25 25 Name and Address of Current		30			Florida Statutes X Yes 10. Name and Address of New R	□ No	l mant	
<u> </u>	S. Haile Bld Hadress of Collecti	Trogratered Agent	81	Γ~N	Name	IV. Hame and Address of New N	edisteren y	- Goill	
MARKE	IA DOCC								
	la, ross Ollywood blyd.		82	S	Street Addres	ss (P.O. Box Number is Not Acceptab	le)		
	WOOD FL 33020		83	\vdash					
HOLLI	1100012 00020			L					
			84	٦	Dity		FI	85 Z	Zip Code
or registere familiar with	the provisions of Sections 607,0502 d agent, or both, in the State of Florid , and accept the obligations of, Section	 Such change was authorized 	the above r by the corp	ora	ned corporat ation's board	tion submits this statement for the pur of directors. I hereby accept the appo	pose of cha pintment as	nging its registere	registered office od agent. I am
SIGNATURE	ignal no its evi in printed name of regressive a jer tia	cultificial accionance (NOTE)	Bunisland Aron	it ein	gnature required #	Allow so notalises	DATE		
12.	CFFICERS AND		13.	ii ay	3-1200/C (C-1,100) P	ADDITIONS/CHANGES TO OFF		DIRECT	ORS IN 12
THE I	DP	DELETE	1 1 TITLE		<u> </u>	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Change	
NAME	ROBERTS, SCOTT		1.2 NAME						
STREET ADDRESS	2206 HOLLYWOOD BLVD.		1.3 STREET	CA	DRESS				
CHY S. Zer	HOLLYWOOD FL 33020		1.4 CITY - S	1 - Z	?IP				
THE T	DVST	DELETE	2 1 TITLE) Change	Addition
NAME	ELLNER, MARCUS		2 ? NAME						
STRUTT ADDRESS	2206 HOLLYWOOD BLVD.		23 STREET	ADI	DRESS				
GID+ \$1 ZIP	HOLLYWOOD FL 33020		2.4 CITY - S	1-7	!IP	- 			
l Title		DELETE	3 1 ∏11€				Ĺ] Change	Addition
NAM:			3.2 NAME						
STREET ANDRESS			33 STREET						
015 S1 ZP		DELETE	3 4 CITY - S 4 1 TITLE	1 - Z	319		г] Change	. [] Addition
NAME		L., D. C. C.	4.2 NAME				L] Onlange	
STREET ADDRESS			4.3 STREET	ADI	DHESS				•
017 + S = 712			4.4 CITY - S						
10.6		DELFTE	5 1 TillE					Change	Add-tion
NAME			5 2 NAME				-		
STHEET ACCORESS			5 3 STREET	ADI	DRESS				
OF V-\$1, 709			5 4 C(1Y - S	1-2	21P				
THISE		DELETE	6 1 TITLE					Change	Addition
NAM!			6.2 NAME						
SIPHT AFCIPESS			6.3 STREET	ADI	DRESS				
COY ST-ZIP	in the second	in the state of th	6 4 CITY - S						
certify that to oath, that f	certify that the information supplied with information indicated on this annular are an officer or director of the corpor Block 12 or Block 13 if changed, or o	al report or supplemental annua ation or the receiver or trustee e	il report is tru empowered t	ю а	and accurate	and that my signature shall have the	same legal	effect as	if made under
ł.							,		

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/25/96 (305) 920.9799