FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000025170 (8)

Principal Place of Business Mailing Address 1947-9 NW 9TH AVE FT LAUDERDALE FL 33311 PLANTATION FL 33325-3502									
US						3. Date Incorporated or Qualified 03/29/1995		te of Last F 9/1996	Report
·	Place of Business	2a. Mailing Addr	ess			4. FEI Number	00/2	A	pplied For
21 Suite, Apt.	# site	26 Suite, Apt. #.	etc			65-0567164			ot Applicable Additional
22		27	0.00			5. Certificate of Status Desired			equired
City & Sta	le	City & State				6. Election Campaign Financing			May Be
23	Country	28 Zip		Country		Trust Fund Contribution	<u> </u>		to Fees
24	25	29	30	,00,111,	'	This corporation has liability for Florida Statutes		ax unders]No	5. 199,032,
	9. Name and Address of Cu			81	······································	10. Name and Address of New Ro		gent	
ABANDOND, JAY					Name				
450 S.W. 118TH AVE. PLANTATION FL 33325				82	Street Add	dress (P.O. Box Number is Not Accepta	ole)		·
PUA	MINION FL 33325			83					
					-	······································		Tant Bu	0-1
				64	City		FL	85 Zip	Code
SIGNATURE		AND DIRECTORS	1	tered Age	ent signature requ	ilred when reinstating) ADDITIONS/CHANGES TO OFFI	DATE CERS AND		
TIBLE	D ABANDOND, JAY	☐ DE	ſ	1 TITLE	1			L_] Change	Addition
NAME STREET ADDRESS	1947-9 NW 9TH AVE		1	2 NAME 3 STREET	T ADDRESS				
City-St-ZiF	FT LAUDERDALE FL			4 CITY-S	ſ				
TITLE		DE	LETE 2	1 TITLE		*		Change	Addition
NAME			2	2 NAME					
STREET ADDRESS	ļ				T ADDRESS				
CHY-ST-ZIP TILE		[] DE		4 CITY-	\$1-ZIP	and the state of t		Change	Addition
NAME	}			2 NAME					
STREET ADDRESS			3	3 STREET	T ADDRESS				
CITY+ST-7IP				4. CITY-	ST-ZIP				
TITLE		☐ DE		1 TITLE	İ			Change	Addition
NAME				2 NAME	- 1				
STREET ADDRESS				.3 STREET .4 CITY - S	T ADDRESS				
CITY - ST - ZIP TITLE		☐ DE		1 TITLE	31-2F			☐ Change	Addition
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STHEFT ACURESS			5	3 STREE	T ADDRESS				
City - \$1 - 7(P				4 CITY-S	ST-ZIP			·	
TITLE		☐ DE	2	1 TITLE	1			Change	Addition
NAME				2 NAME					
STREET ADDRESS			6	3 STREET	T ADDRESS				

64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental agruent apport is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver of trysted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 y changed, or in an attainment with an address.

Abandond/Dir.

SIGNATURE:)

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-24-97 979

FILED

Mar 28 1997 8:00am

Secretary of State

Daytime Phone #