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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

2, Principal Place of Business

City & State

MIAMI

22

TITLE

NAME

STREET ADDRESS

DOCUMENT A	P95000026500 (5)	
SOL B CORP.		
2945 FLA	MINGO DR.	

MIRTI BEACH, M. 33140-3916 Principal Place of Business

ATTACOCEMEDS. HOTT AMOOD ET 33010 3JUT 2948 flamingo DR. Hiami Beach, FL 33140-3916

2945 FLAMINGO DE

BEACH, A.

81

82

83

Country

MIAMI BEACH, PL. 33140-3916 2a. Mailing Address 2945 MAMINGO DR.

U.S.A.

3. Date Incorporated or Qualified 3a. Date of Last Report 04/03/1995 03/19/1996 4. FEI Number Applied For 65-0570866

5. Certificate of Status Desired  $\Box$ 6. Election Campaign Financing

\$5.00 May Be Trust Fund Contribution NO  $\Box$ Added to Fees 8. This corporation has liability for intangible tax under s. 199.032,

Not Applicable

\$8.75 Additional

Fee Required

FILED

Jun 04 1997 8:00am

Secretary of State

☐ Yes 10110 Florida Statutes 10. Name and Address of New Registered Agent

			s of Current			Agent
COPPOR	TION I	<b>FORMA</b>	NON-CERV	OE9	. INC.	
				~	44	<u> </u>

USA.

2945 FLATINGO DR

Suite, Apt. #, etc.

MIATI

33140

City, & State

2945 GLAMINGO DR. HIAMI BEACH, A.

29

Name

Street Address (P.O. Box Number is Not Acceptable)

84 City 85 Zip Code 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 of agent. I	r registered George of Both, in the State of Florida. It am familiar virth and accept the obligations of, Sc Sphere yellow Inited have of regulated agent and title if api	ection 607.0505, Florid	a Statutes		nereby accept the appointment as ret	gistered
12.	OFFICERS AND DIRECTO		13.	ure required when reinstating) ADDITIONS/CHANGE	ES TO OFFICERS AND DIRECTORS I	N 12
TITLE	DPS	DELETE	1.1 TITLE		Change [	Additio

12 CR2E034 (9/96 TIT GENET, S. MICHAEL 2945 FranINGO DR. 2945 FLAMINGO DR. STREET ADDRESS 1.3 STREET ADDRESS MUDDEL GROOM HEADY BEACH, PL. MAMI BEACH, FL. 3340 - 3916 CITY-ST-ZIF 1.4 CITY-ST-ZIP Addition Change TITLE 2.1 TITLE 22 NAME NAME STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE NAME 3.2 NAME STREET ADDRESS 3.3 STREET ADDRESS CITY-ST-ZIP 34. CITY-ST-ZIP DELETE. Change Add/tion TITLE 41 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP

CITY-ST-ZIP 6.4 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 appropriate poor for supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the comparation in the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name I am an officer or director of appears in Block 12 or Block

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

DELETE

Change

Addition