## 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 # P95000031445 (6)

ALLIANCE R.I.B., INC.

Principal Place of Business

Mailing Address

## **FILED** Apr 17 1997 8:00am Secretary of State



6323 BAY CLU FORT-LAUDER		6323 BAY-CLI FORT LAUDER	6323 BAY GLUB DRIVE NO. 4 FORT LAUDERDALE PE 23308-1830						
	•					3. Date Incorporated or Qualified 04/18/1995		te of Las 19/199	
	ace of Business	2a. Maiting Ad	ddress			4. FEI Number			Applied For
21 /// C	SW 23RD STR	EE 26 -20	me a	12		65-0575152			Not Applicable
Suite, Apt		Suite, Apt.	. #, etc.			5. Certificate of Status Desired			5 Additional Required
City & State		City & Star	te			Election Campaign Financing Trust Fund Contribution		•	May Be d to Fees
Ziρ	<u> </u>			Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes			
24	25   9. Name and Address of C			<u>,,                                    </u>		10. Name and Address of New Re			
етр	OUP, JAMES W			81	Name		· <del>*</del>	<del>- 7</del>	
	3 BAY CLUB DRIVE NO 4								
FORT LAUDERDALE FL 33308					2 Street Address (P.O. Box Number is Not Acceptable)				
				83					
				84	City		FL	85 Z	ip Code
11 Pureumit t	to the provisions of Sections 60	7 0502 and 607 1508 EI	orida Statutes	the above	e-named co	orporation submits this statement for the I	purpose of	changin	g its registered
office or re agent. Lai	egistered agent, or both, in the m familiar with, and accept the	State of Florida. Such ch obligations of, Section 6	nange was aut 07.0505, Florid	horized by da Statute	the corpo s.	ration's board of directors. I hereby acce	pt the app	ointment	as registered
SIGNATURE.	Signature, typed or printed name of registe	red agent and little if applicable.	(NOTE: F	Registered Age	ent signature re	quired when rainstating)	DATE		
12.	OFFICEF	RS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFIC	CERS AND		
TITLE	D		DELETE	1.1 TITLE				Chang	ge L Addition
NAME	SCHINSING, SCOTT			1.2 NAME					
STREET ADDRESS	1305 S.W. 31ST STREET			1.3 STREET	ADDRESS				
CITY - ST - ZIP	FORT LAUDERDALE FL			1.4 CITY - 9	ST- <b>Z</b> IP				
TIFLE	D	L	DELETE	2.1 TITLE				L Chang	ge 🔲 Addition
NAME	HARVEY, DANIEL			2.2 NAME			e*		
STREET AODRESS	6323 BAY CLUB DRIVE,	NO 4		2.3 STREET	ADDRESS				
CITY-ST-ZIP	FORT LAUDERDALE FL			2.4 CITY-	SY-ZIP		· · · · · · · · · · · · · · · · · · ·	110	- Interes
10LE		$\sqcup$	DELETE	31 TITLE				L. Chan	ge L Addition
NAME				32 NAME	-				
STREET ADDRESS				3.3 STREE	ADDRESS				
CITY - S1 - ZIP				34 CITY-	ST-ZIP			T 1 61	- Dadisa
TOLE		<u></u>	] DELETE	4.1 TITLE	İ			Chan	ge L. Addition
NAME				4.2 NAME	1				
STREET ADDRESS					ADDRESS				
CITY - S1 - ZIP			DELETE	4.4 CITY-1	ST-ZIP			☐ Chan	ge Addition
TITLE		L	ULLEIC	5.1 TITLE				L.J. UHATI	An Thoman
NAME				5.2 NAME	LIBBOTOS				
STREET ADDRESS					ADDRESS				
Crty - St - ZIP			DELETE	5.4 CITY-1	SI-ZIP			Chan	ge Addition
TITLE		Ļ.	J DULL16						5 1.000/110/1
NAME				6.2 NAME					
STREET ACCRESS				1	T ADDRESS				
CHY-ST-ZIP	b condition that the before at it	upplied with this filing do	on not qualify	6.4 CITY-	SI-ZIP	ated in Section 119.07(3)(i), Florida Statut	es I furthe	r certify t	hat the
informatic flam an o	on indicated on this annual reni	ort or supplemental annu ition or the receiver or tru	ial report is trui istee empower	e and acc red to exe	urate and t	that my signature shall have the same leg port as required by Chapter 607, Florida	jai effect a Statutes; a	s it made	i under oatn; th

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF PICER OR DIRECTOR DANIEL HARVEY