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

PROFIT

SIGNATURE: _



FLORIDA DEPARTMENT OF STATE

	RPORATION JAL REPOF 1996	(5.00 A) 1 1	DI	Secretar	. Mortham y of State :ORPORATIONS		
1. Corporation	MENT #	P9500	003207	'3 (5)			
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215 S.W. LEJEUNE ROAD 215			Mailing Addre				14 18 8 1
			215 S.W. LEJEUNE ROAD MIAMI FL 33134-1799				
						Date Incorporated or Qualified	
A 6:						04/14/1995	
2. Principal Pl	ace of Business		2a. Mailing Ad	ddress		4. FEI Number Applied Applied Not App	
Suite, Apt.	#, etc.		Suite, Apt	. #, etc.		\$8.75 Addition	
2		·	27			5. Certificate of Status Desired Fee Require	
Orty & State	9		City & Sta	ite		6. Election Campaign Financing Trust Fund Contribution \$5.00 May	
Z _I p		Country	Zip		Country	R. This corporation has liability for intangible tax under s 199.03	
4	25		29		30	Florida Statutes	Σ,
	9. Name and	d Address of Curren	it Registered Age	nt	81 Name	10. Name and Address of New Registered Agent	
NORTHROP, MICHAEL K ESQ. 215 S.W. LEJEUNE ROAD MIAMI FL 33134-1799					L. I	82 Street Address (P.O. Box Number is Not Acceptable)	
	1 22124 1 (30)				1**1		
MINTER F	L 33134-1789				\ 		
		of Postions 607 0500	and 607 1500 51-		84 City	FL 85 Zip Code	
11. Pursuant t or register familiar wit SIGNATURE	to the provisions ed agent, or bott th, and accept th	ne obligations of, Section	ion 607.0505, Florid	as authorized da Statutes.	the above-named oby the corporation's	corporation submits this statement for the purpose of changing its registered solved of directors. I hereby accept the appointment as registered agent.	d office I am
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AND TYPED OR PRINTED NAME OF SIGNING DEFICER OR WHECTOR

4/16/96 (305)446-5663