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

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DOCU 1. Corporation	MENT #	P95000	033199 (7)	*							
· ·	Nater Chart		`									
Principal Place	of Business		Mailing Address				1(8)		H BANK BANK BA			
1500 SAN R SUITE 205	remo ave nue		1500 SAN REMO AVENUE									
CORAL GABLES FL 33146			SUITE 205 CORAL GABLES FL 33146						- 2			
								21/1995	or Qualified	3a. Dat	e of Last	Report
2. Principal Pl	ace of Busines () San Kel	^^#\ <u>}-</u> \\ // ⊢	2a. Mailing Address	as	Noia	_,	4. FH Nu	- <i>0</i> 5	7420	9		Applied For Not Applicable
Suite, Apti	10 217		Suite, Apt. #, etc.				5. Certifica	ite of Statu	s Desired			5 Additional
CA State	Labb	(EI	City & State				6. Election	Campaign	Financing			e Required OO May Be
23 CO 1			8]	·	Country			and Contrib	ution as liability for i	intanoithe t	Add	led to Fees
24 201	9 Name and Ac	USIT 2 Idress of Current Re	9	30	-		Florida 9	Statutes	Yes	□ No		5 150.002,
*****	3, 1121114 0110 710	Tale 33 Or Gallelle Me	gistered Agent		81 Nama	2 C	10. Name a	and Addre	ss of New R	egistered	Agent	
·	JEFFREY B	-			82 SN/92	Kards K	√°.0. 6€21	July is I	VIOCA) contab		د ما (<i>کا</i> لا	vil 0
SUITE 8	an remo avenu 205 -	E			83		رر	ull	ryer 1	DI	ryer	me_
CORAL	GABLES FL 3314	6			84 Cit	ווע	9	بر ا			85 2	Zu Godo. 11
11. Pursuant t	o the provisions of S	govons 607.0502 and	667.1508, Florida Stati	utes, the a	bove-named c	<u>EY</u>	al C		eS	FL.	anoina ita	33146
or register familiar wit	ed agent, or both, in h, and accept the	The State of This I S	667.1508, Florida Stati ch change was author 07.0505, Florida Statuti	ized by th os.	e corporation's	board o	of directors. I	hereby ac	cept the app	pose of cha pintment as	registere	ed agent. Lam
S'GNATURE.	Stgrature 17-35 plinter	in delinegistenet agent and tis			reo Agerit signal ze			4	1/12/	96		
12.		OFFICERS AND DIF	LCTORS	13	3.			NS/CHAN	GES 10 OFF	CERS AND	DIRECT	ORS IN 12
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NAME				6.2	NAME							
STREET ADDRESS CHTV-ST-ZIP					STREET ADDRESS							
OLIVE OLIVER				6.6	011Y - \$1 - 7(P)							

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes, I further certify that the information indicated on this annual report or supplemental annual report 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 on the corporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an addrea:

SIGNATURE:

CITY-ST-7IF

6 4 CITY-ST-7IF*

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