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

PROFIT **CORPORATION** ANNUAL REPORT

1997



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P9500035265 (4)
SAVE YOUR SOLE, INC.

## **FILED** Apr 25 1997 8:00am Secretary of State

Principal Place of Business Mailing Address 4026 SW 57TH AVENUE 4028 SW 57TH AVENUE								
MIAMI FL 33155		MIAMI FL 33155-5318						
					3. Date Incorporated or Qualifie 05/04/1995	d 3a. Da	te of Last Re 25/1996	hode
2. Principal Pl	ace of Business	2a. Mailing Address					Applied For Not Applicable	
Suite, Apt. 1	#, etc.	Suite, Apt. #, etc.	<u> </u>				\$8.75 Additional Fee Required	
City & State		City & State			Election Campaign Financing     Trust Fund Contribution	Added to Fees		
Zip 24	Country 25	7 ip	Country 30		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes X No			
	9. Name and Address of Curren	t Registered Agent		1	10. Name and Address of New	Registered /	Agent	
	INGER, SCOTT R		81	Name				
	NW 36TH STREET STE 100 Al FL 33166		82	Street Add	ress (P.O. Box Number is Not Accep	otable)		
MIM	MI LT 22 100		83					
							Tee 1 72: (	
			84	1		FL		Code
agent. I at SIGNATURE	to the provisions of Sections 607.050 ogistered agent, or both, in the State of familiar with, and accept the obligation familiar with and accept the obligations.	angus or, Section 607.0505, Fi	ionida Statutt	18	itro when reinstating)	DATE		
12.	OFFICERS AN		13.		ADDITIONS/CHANGES TO OF	FICERS AND		
TITLE	MCCABE, PATRICK J		1.1 TiTLE				Change	Addition
NAME	8023 SW 133RD PLACE		1.2 NAME 1.3 STREET ADDRESS					
STREET ADDRESS CITY-ST-ZIP	MIAMI FL 33183		1.4 CITY-SI-ZIP					
TITLE	D	DELETE	21 1171.1	01 2/1			Change	Addition
NAME	DIAZ, REYNOL L		2.2 NAME					
STREET ADDRESS	2420 SW 25TH AVENUE		23 SIRFE	1 ADDRESS				
CITY-ST-ZIP	MIAMI FL		2 4 CITY	SI-7IP			Change	Addition
TITLE		☐ DELETE	3.1 TITUE 3.2 NAME				[ Change	
NAME Street address				1 ADDRESS				•
CITY-ST-ZIP			3.4. CITY-					
TITLE		DELETE	4.1 TOLE				Change	☐ Addition
NAME			4 2 NAM					
STREET ADDRESS			4.3 STREE	1 ADDRESS				j
CITY-ST-ZIP		Delete	4.4 C(1) Y	\$1-7IP			Change	Addition
TITLE		DELETE	5.1 TITLE				☐ Change	CT VOURDII
NAME PERFET ADDRESS			5.2 NAMS	1 ADDRES\$				
STREET ADDRESS  CITY-ST-ZIP			5.4 CITY-					
TITLE		DELETE	61 TITLE	O. Ell			Change	Addition
NAME			6.2 NAME					
STREET ADDRESS			6 3 STREE	TADDRESS				
CITY-ST-ZIP			64 CITY	ST - ZIP	11.0		contilu that	

To 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 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 corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 4 hanged, or on an attachment with an address.

Physick TMC he 4-21-97 305-665-8600