SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

		1	1996	,

SIGNATURE:

## P95000039275 (9)

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

	MENT # P9500 CRITERIA, INC.		`	,						
rincipal Place	of Business	Maitin	g Address							415 <b>0</b> 500)
9451 NW 8TH		945	1 NW 8TH ST.							
	INES FL 33024		IBROKE PINES FL	33024						ate of Last Report
							<ol> <li>Date Incorpora</li> <li>05/16/199</li> </ol>		3a. D	ale of Last Report
Principal Pla	ice of Business	2a. M	ailing Address		<b></b> .		4. FEI Number	<del>-</del>		Applied Fo
		26	The Mark to the		_					Not Applic  \$8.75 Additions
Suite, Apt. #	, etc	27	uite, Apt #, etc.				5. Certificate of S	tatus Des red		Fee Required
City & State			ity & State				6. Election Camp	aign Financing		<b>\$5.00</b> May Be
		28		T Co.	untry		Trust Fund Cor		r intappible	Added to Fees e tax under s 199 03
Zip	Country 25	29 Z)	Þ	30	шпту		8. This corporation		Yes	No
	9. Name and Address of Currer		ed Agent				10. Name and Ad	dress of New R	egistered	Agent
PE	REIRA, ANSELMO A				81	Name				
	51 NW 8TH ST.				82	Street Add	ress (P.O. Box Numbe	r is Not Accepta	able)	
PE	MBROKE PINES FL 33024				83					
					84	City				85 Zip Code
*	o the provisions of Sections 607.050				i I	•			FI	<b>L</b>
4		•	ection 607.0505, f	londa Stal	bove-n d by th lutes.					
	Signature typed or printed nan is all registered ag OFFICERS AN	gent and title if as	optrable (N ORS	OTE Register	ed Agend	: signature requi	ired when reinstating)	ANGES TO OFF	DATE ICERS AN	ID DIRECTORS IN 12
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