FILE NOW: FILING FEE / PROFIT CORPORATION ANNUAL REPORT 1996		FLOR	FLORIDA DEPARTMENT OF STATE Sandra B. Morthani Secretary of State DIVISION OF CORPORATIONS		•
1. Corporatio	MENT # P9	500004297	6 (7)		·
Principal Place	······				
3350 SOUT	HWEST 27TH AVENUE GROVE FL 33133		^{is} Iwest 27th aven Grove FL 33133	UE	
2. Principal Pl	lace of Business	2a. Mailing Add	tran		3. Date Incorporated or Qualified 3a. Date of Last Report 06/02/1995
21		28. Maning Add	ress		4. FEI Number 67-0631243 Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. :	#, etc.		5. Certificate of Status Desired \$8.75 Additional
City & State	0	City & State)	······	6. Election Campaign Financing 55.00 May Be
23 Zip	Country	28		untry	Trust Fund Contribution L. Added to Fees
24	25]	29 of Current Registered Agent	30		 8. This corporation has liability for intangible tax under s 199.032, Florida Statutes Yes No 10. Name and Address of New Registered Agent
SILVER, SCOTT A 3350 SW 27TH AVENUE COCONUT GROVE FL 33133 84 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office familiar with, and accept the obligations of. Section 607.0505. Elorida Statutes by the corporation's board of directors. I hereby accept the appointment as registered affice appointment as registered agent. I am					
SIGNATURE	Signature typed or printed name of rege	- ,	ototaa.o.		
12.	OFFIC	ERS AND DIRECTORS	13.	a Agent signature (ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
THLE NAME STREET ADDRESS	D Izhak, yorum 3350 Southwest 2 Coconut grove Fi		: 1.2 M 1.3 S	iame . Treet address	ADDITIONS/CHANGES TO OFFICERS AND DIFIECTORS IN 12 I Change Addition I ZHAK, YORAM Change Addition 12 12 12 12 12 12 12 12 12 12
CITY - ST-ZIP TITLE	D	L 33 133		ITY - ST - 7IP ITLE	
NAME STREET ADDRESS CITY - ST - ZIP	MALLER, ERIC 3350 Southwest 2 Coconut grove Fi			TREET ADDRESS	
TITLE		DEL		ITY-ST-ZIP ITLE	Change C Addition
NAME STREET ADDRESS			3.2 N 3 3 8	AME TREET ADORESS	
CITY-S1-ZIP TITLE				ITY-ST-ZIP	
NAME		L.) BU	4 1 1 4 2 N		Change C Addition
STREET ADDRESS			4.3 5	IREET ADDRESS	900001840239 -05/28/9601021028
CITY-S1-ZIP TITLE				TY-\$T-ZIP ITLE	***200.00
NAME			5.2 N		Change Addition
STREET ADDRESS CITY - ST - ZIP				REET ADDRESS	
TITLE	·			IY-S1-ŻIP IJLE	Addition
NAME	6.2 N		ME.		
STREET ADDRESS CITY-ST-ZIP				REET ADDRESS TY - ST - 21P	
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 cortify 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 if changed, or on an attachment with an address.					
SIGNATURE: SIGNATURE AND TYPED OF PLINTED NAME OF SIGNING OFFICER OF DIRECTOR 4/18/96					