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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

P95000046125 (7)

FAN POLL, INC.

1. Corporation Name

FART	OLE, IIIO.				
Principal Place of	f Business	Mailing Address		1 100 1100 1010 10111 80 11 12	II 00%)(00)% 01010 8%(01 11510 11691 0111 1001
46 SW FIRST ST., STE, 400 Miami Fl 33130		46 SW FIRST ST Miami FL 33130	STE. 400		
				3. Date Proorporated or Qualified 06/06/1995	3a. Date of Last Report
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	Applied For
21		Suite. Apt. #, etc.		191 8850-59	Not Applicable \$8.75 Additional
Suite, Apt. #,	eic.	27		5. Certificate of Status Desired	Fee Required
City & State	and a processing the second se	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country 25	7 _{[p}	Gountry 30	8. This corporation has liability for in florida Statutes Yes	:
24	9. Name and Address of Curre		130	10. Name and Address of New R	<u>/ ` </u>
			81 Name		
BUCHBI	INDER & ELEGANT, P.A.		82 Street Addr	ess (P.O. Box Number is Not Acceptable	e;
46 SW FIRST ST., STE. 400					
MIAMI F	L 33130		83		
			84 City		85 Zip Code
11. Pursuant to or registered familiar with SIGNATURE	the provisions of Sections 607.05 d agent, or both, in the State of Flo , and accept the obligations of, Se	02 and 607.1508. Florida Stat brida. Such change was autho ction 607.0505, Florida Statut	utes, the above named corporized by the corporation's boares.	ation submits this statement for the pur rd of directors. Thereby accept the appo	pose of changing its registered office bintment as registered agent. I am
Si	griature, speed or content harve of registered ag		NOTE: Fregister of Agent signature require		DATE
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12
TOTLE NAME	DPST ELEGANT, ADAM T	() () () ()	1.2 NAME		
STREET ADDRESS	1360 NORTH VIEW RD., S	SUNSET ISLAND #1	1.3 STREET ADDRESS		
CITY - ST - ZiP	MIAMI BEACH FL 33140		1.4 CITY+ST 7IF		
TITLE		DEFEIF	2 1 THE		Change Addition
NAME			2.2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
C-TY ST-ZIP		DELETE	24 CISY - ST - 712 3 1 TITLE		Change Addition
NAME		<u></u>	3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-S1-7IP			3.4 CHY+ST ZIP		
Til.f		[] DEFELE	4 1 TILLE		Change Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
TILLE		[] DELETE	4.4 CITY-ST-ZIP 5.1 TiTLE		Change Addition
NAME			5 2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
C-114 - S1 - 21P			5.4 CHY ST- ZIP		
TITLE		DELFTE	6 1 TITEE		Change Addit-on
NAME			6 2 NAME		
STHEE: ADDRESS			6.3 STREET ADDRESS		
CHY-S1-ZIP	contifu that the information suppose	cl with this filma is voluntariar	■ 64 C(1Y-\$1-Z(P) urnished and does not qualify:	for the exemption stated in Section 119	.07(3)(k), Florida Statutes. I further
certify that to	the interpretion indicated on the ar	nnual report or supplemental a rporation or the receiver or tru:	innual report is true and accura stee empowered to execute th	ate and that my signature shall have tho is report as required by Chapter 607, FI	same legal effect as il made under

SIGNATURE: ALL 7. Elegant Resident SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER ON DIRECTOR

†

4.8.96 305.531.0937