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

PROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000048404 (4)

GROUP NEXUS, INC.

		_	
Principal	Place	of B	Business

1808 NW 20TH STREET

Mailing Address

2520 N.W. 5TH AVENUE

FILED May 20 1997 8:00am Secretary of State



US	8	MIAMI FL 33121-4314			1	
					3. Date Incorporated or Qualified 06/21/1995	3a. Date of Last Report 02/02/1996
2. Principal P	lace of Busines Mark	2a. Mailing Address 26 2520 NW	5M 6	WE	4. FEI Number 65-0590738	Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City State	MI		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	72110	Coupty	Λ <i>0</i>	8. This corporation has liability for in	langible tax under s. 199,032,
24 5917	9. Name and Address of Curren		io //1/ [<i>/</i> C	Florida Statutes 10. Name and Address of New Reg	Yes No
LOR	BER, ALAN R	- Hogistorea Agent	B1 N	Vame	IV. Name and Address of New Neg	Istorou Ayent
	KANE CONCOURSE		82 9	Street Aries	cos (O.O. Barrish as fa New Assessment)	
	E 400		62 3	areet Maar	ess (P.O. Box Number is Not Acceptable	0)
, BAY	HARBOR ISLANDS FL 33154-20	55	83			
.			84 (City		85 Zip Code
,				•		
OTTICE OF F	egistered agent, or both, in the State	of Florida. Such change was aut	lhorized by th	amed corp le corporat	oration submits this statement for the pu ion's board of directors. I hereby accept	rpose of changing its registered.
agent. La	m familiar with, and accept the obliga	itions of, Section 607.0505, Florid	ca Statutes	,		and appearance and to regions for
SIGNATURE	Signature, typed or printed name of registered age:	and telouf sont cable (MOTE).	Wastered Aneni c		ed when roinslating)	DATE
12.	OFFICERS AND		13.	ignatore redestr	ADDITIONS/CHANGES TO OFFICE	· · · · · · · · · · · · · · · · · · ·
TITLE	PO	DELETE	1.1 TITLE		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Change Addition
NAME	KOCHEN, MARCELO J		1.2 NAME		Chat	·
STREET ADDRESS	2520 N.W. 5TH AVENUE		1.3 STREFT ADD	DRESS	SAME	
CITY-ST-ZIP	MIAMI FL 33127		14 CITY - ST - 7	P		
TITLE	VPD	☐ DELETE	2 \$ 111LF		STD	Change Addition
NAME	KOCHEN, CARLOS		2.2 NAME		ROCHEN, CHIRLOS	
STREET ADDRESS	2520 N.W. 5TH AVENUE		23 STREET ADE	DRESS Z	1150 MM 2 mane	
CITY-ST-ZIP	MIAMI FL STD	Detres	2 4 CITY - S1 - Z	'iP	minu, -	13127
TITLE :	LUSKY, EDWARD B	☐ DELETE	31 TITLE		_	Change Addition
NAME	2520 NW 5TH AVENUE		3.2 NAME		Delete M	a. Wsky
STREET ADDRESS	MIAMI FL		3 3 STREET ADD			
CITY-ST-ZIP TITLE	MPWH 1 C	DELETE	3.4 CITY: ST-Z	(P)		Change Addition
NAME			4. 2 NAME			Change C Addition
STREET ADDRESS			4.3 STREET ADD	SS 38K		
CITY-ST-ZIP			4.4 CITY - ST - ZI			
TITLE		☐ DELFTE	5.1 1(1)[8			Change Addition
NAME			5.2 NAME			ا دیاہ م
STREET ADDRESS			5.3 STREET ADD	RESS		100 SIW
CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·		54 CITY - ST - ZI	þ		<u> </u>
TITLE		☐ D€LETE	6.1 111LE	'		☐ Change ☐ Addition
NAME			6 2 NAME		200002201 -06/04/970100:	0772
STREET ADDRESS	1		6 3 STREET ADD	ı	-06/04/970100:	3009
CITY-ST-ZIP	w carlify that the information supplied	with this filing close not a self-	6.4 CITY-SI-7	P Long etats -1	#### # ######	•
14. I do 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 are use point 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 comparation or the receiver in 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 pranced, or on an attackment with an address.						