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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P95000051959 (1)

SIGNATURE:

FILED May 02 1997 8:00am Secretary of State

0129797

A.E.O. P	ATORES, INC.]]	H BANAT ALIAN II	HANA MANAN ANDR	
	of the second distance of the second of the	**************************************		·	· · · · · · · · · · · · · · · · · · ·		e erek i birak k		an an
Principal Place of Business Mailing Addres						I CE Eschibt sin iftien friest matti affrit Cott	,1 40(8) WING I	010 13101 \$111B	· IŲ() TŲLI
4830 HILLCREST DR. 4330 HILLCREST DR. 4800						}			
HOLLYWOOD FL 33021 HOLLYWOOD FL 33021-7834			7834			j			
						3. Date Incorporated or Qualified 07/05/1995		te of Last Re 9/1996	eport
2. Principal F	Place of Business	2a. Mailing Address				4. FEI Number		Ap	oplied For
21		26				65-0609885	65-0609885 Not Applicable \$8.75 Additional		
Suite, Apt	#, etc.	Suite, Apt #, etc.				5. Certificate of Status Desired		\$8.75 A	
City & Sta	le	City & State				6. Election Campaign Financing		\$5.00	<u> </u>
23	•	28				Trust Fund Contribution		Added t	
Zip	Country	Zip	Cou	ntry		8. This corporation has liability for	intangible i	tax under s.	
24	25	29	30		···			No	
	9, Name and Address of Cur	rent Registered Agent		81 1		10. Name and Address of New Ro	egistered A	gent	
	RN, ROBERT E			" "	Name				
	O S. DADELAND BLVD.			82 5	Street Addre	ss (P.O. Box Number is Not Accepta	ble)		
#11	MI FL 33156			83					
: MIP	WI LT 22100						, <u>-</u>		
				84 (City		FL	85 Zip (Code
11. Pursuant	to the provisions of Sections 607.0	0502 and 607.1508, Florida Stat	lutes, the al	oove-n	amed corpo	oration submits this statement for the pon's board of directors. I hereby acce		changing it	s registered
office or agent 1:	registered agent, or both, in the St am familiar with, and accept the ob	ate of Florida. Such change wa oligations of, Section 607,0505, i	s authorized Florida Stat	d by th utes.	e corporatio	on's board of directors. I hereby acce	ipt the appo	piniment as	registered
SIGNATURE	-=	•							
		Lagent and ritle if applicable. (N AND DIRECTORS	OTE. Flegisleres	Agent s	ignature require	d when reinstating) ADDITIONS/CHANGES TO OFFICE	DATE CERS AND	DIRECTOR	S IN 12
12.	[PD	DELETE	1.1 (1)	TLE		ADDITIONS/CHANGES TO OFFI		Change	Addition
NAMÉ	YAS, RONALD		1,2 N/				•		
SERFET ADDRESS	4330 HILLCREST DR. #600			reet ad	DRESS				
CITY-SI-ZIF	HOLLYWOOD FL 33021		1	TY-ST-Z	1				
TIFLE		DELETE	2 1 TI					Change	☐ Addition
NAME:			2.2 N/	ME			*1,		
STREET ADDRESS	}		2351	REET AD	ORESS				
CHY-ST-ZIP			2.4 C	ITY-ST-	ZIP				
THE		☐ DELFTE	3.1 [0]	TLE			-	Change	Addition
NAME	\		32 N/	AME	- 1				
STREET ALIDRESS				REET AD					
CHY-ST-ZIF		Deveste		17Y-ST-	ZIP			170	There.
THTLE		DELETE	4.1 1/		(ļ	Change	☐ Addition
NAME			4 2 N						
STREET #DIDHESS	}		1	REET AD	1				
Crty+St-7tP		DELETE		TY-ST-2	TIP	<u> </u>		Change	Addition
33117		☐ NETE IE	51TI		Ì			T FUNDING	F-T MONION
NAME			5.2 N/		borce	•			
STREET ADDRESS	1		1 1	REET AD	ì				
CHY-SI-ZIP	······································	DELETE	5.4 Ct	1Y-\$1-2	THY			Change	Addition
TITLE	1	La carrie	5.2 N/		1		'	D.Milipo	
NAME	(0.2 N/		50500				

14. If 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. If further certify that the information inclicated 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 eath; 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.