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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

P95000053766 (8) **DOCUMENT #** 

Principal Place of Business Mailing Address  3615 N.E. 207TH STREET 3615 N.E. 207TH STREET SUITE 3303 SUITE 3303							
AVENTURA FL 33180		AVENTURA FL 33180	)	3. Date incorporated or Qualified 07/05/1995	3a. Date of Last Report		
2. Principa: Plac	e of Business	2a. Mailing Address		4. FEI Number			oplied For
		26		65-0597461			ot Applicable
Suite, Apt. #,	etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired			Additional equired
City & State		City & State		6. Election Campaign Financing			May Be
<u> </u>		28		Trust Fund Contribution			to Fees
Ζφ 	Country 25	Zip 29	Country 30	This corporation has liability for it     Florida Statutes     X Yes	ntangibie tax	unoer s	199.032,
L	9. Name and Address of Curre			10. Name and Address of New R		jent	
KLEIN, B 801 BRIC SUITE 19 MIAMI FL	CKELL AVENUE 001		83	ress (P.O. Box Number is Not Acceptab		6E 7	Code
MINTALL	. 00101		84 City		FL	<b>65</b>   Zip	Cooe
SIGNATURE s	grature, typed or printed name of registered age OFFICERS A	ont and bits, if arguest 46  ND DIRECTORS  DELETE	NOTE: Registered Agent synature respir 13. 1 1 TITLE	ADDITIONS/CHANGES TO OFF		OIRE CTO	RS IN 12
vAMé	GROSS, JAMES P		1.2 NAME			•	
TREET ADDRESS	3615 N.E. 207TH STREET	STE 3303	1.3 STREET ADDRESS				
ITY-ST-7iP	AVENTURA FL 33180		1.4 CITY-ST-ZIP				
TLE		☐ DELETE	2 1 TITLE			Change	Addition
AME			2.2 NAME				
TREET ADDRESS			2.3 STREET ADDRESS   2.4 CHY ST-ZIP				
ITLE		DELETE	3 1 TITLE			Change	Addition
IAME			3.2 NAME				
TREET ADDRESS			33 STREET ADDRESS				
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AME TREET ADDRESS			4.3 STREET ADDRESS				
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IAME			5.2 NAME				
TREET ADDRESS			5.3 STHEET ADDRESS				
ITY-ST-7iP		DELETE	54 CHY-ST-7IP 6 1 HILE			Change	Add tion
ITLE		[] Detelt	6 1 111.t 62 NAME			and igo	
AME			6.5 STREET ADDRESS				
STREET ADDRESS DITY+S1+ZIP			6.4 City-S1-ZiP				
14. I do hereby certify that path; that	the information indicated on this ar	inual report or supplemental ai poration or the receiver or trus	imished and does not qualify nnual report is true and accurate empowered to execute to	for the exemption stated in Section 119 rate and that my signature shall have the his report as required by Chapter 607, Fl	-same legal e	mect as in	mage under

SIGNATURE:

TOWNS JUST JAMES P. GROSS

3/29/96

305 935 430/