## 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 # P9500063126 (3)

Principal Place of Business Mailing Address  1101 BRICKELL AVE. SUITE M-100 MIAMI FL 33131  MIAMI FL 33131  MIAMI FL 33131-3114					
					Date of Last Report <b>02/28/1996</b>
2. Principal F	tace of Business	2a, Mailing Address		4, FEI Number	Applied For
21		26		65-0615269	Not Applicable
Suite, Apr 22	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
City & Stat	le	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Z(p)	Country 25	Zip 29	Country 30	8. This corporation has liability for intang Florida Statutes	ible tax under s. 199.032,
24	j25 j 9. Name and Address of Currer		[30]	10. Name and Address of New Register	
all	ren, Sheldon B		81 Name		
	1 BRICKELL AVE.		82 Street Add	iress (P.O. Box Number is Not Acceptable)	
SUITE M-100				7-055 (F.O. BOX Harrison IS HOT HOOD PUBLIC)	
MIA	MI FL 33131		83		
			84 City		85 Zip Code
	(0.50,000	007 4600 Florida Chap 4		poration submits this statement for the purpos	
SIGNATURE	5 productive parted name of registered age OFFICERS AN	ortano titic if applicable (NOT DIDRECTORS	E flegislereo Agent signature requ	ured when reinstaling) DA' ADDITIONS/CHANGES TO OFFICERS	
filité	P	DELETE	1.1 TITLE		Change Addition
NAME	GUREN, SHELDON B		1.2 NAME		
STREET ADDRESS	1101 BRICKELL AVE., #M100 MIAMI FL 33131		1 3 STREET ADDRESS		
CHY-S1-Zer TOTE	S S	DELETE	1.4 City-SY-ZIP 2.1 Title		Change Addition
NAME	GUREN, SHELDON B	- Carrie	2.2 NAME		terest with the Basel Constitution
STREET ADORESS	1101 BRICKELL AVE., #M100		2.3 STREET ADDRESS		
OTY-S7 ZIP	MIAMI FL 33131		2. 4 CITY - ST - ZIP		
Ti"(F	T CHOCK OF SAME	DELETE	3.1 TITLE	· · · · · · · · · · · · · · · · · · ·	Change Addition
MAME	GUREN, SHELDON B		3.2 NAME		
STREET ADDRESS.	MIAMI FL 33131		3.3 STREET ADDRESS		
CHY-ST-ZIP TITLE	MIMMI I L 00101	DELETE	3.4 CITY-ST-ZIP 4.1 TITLE		Change Addition
NAME		Land Option	4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CHY-SI-7-P			44 CITY-ST-ZIP	•	
Tillif		DELETE	5 1 TITLE		Change Addition
NAME			5.2 NAME		
STELLE T ADORESS			5.3 STREET ADDRESS		
Cifr St-Zift	·	T botter	5.4 CITY - ST - ZIP		Chagge Ladden
1111£	! 	L] DELETE	6.1 TITLE		Change Addition
NAME PRODUCT ADVIOLOGY			6 2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		

14. If do hereby cert ly 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 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 repeiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 of florid 15 if chapted, or operation or the repeiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

305 374 4007

**FILED** 

Apr 15 1997 8:00am

Secretary of State