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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Socretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000063686 (6)

Principal Place of Business Mailing Address 943 ALMERIA AVENUE, SUITE 636 CORAL GABLES FL 33134 Mailing Address 343 ALMERIA AVENUE, SUITE 636 CORAL GABLES FL 33134								
				(3. Date Incorporated or Qualified 08/17/1995	3a. Date of Last R 07/24/1996	eport
2. Principal Place of Business		2a, Mailín 26	2a, Mailing Address 26			4. FEI Number 65-0601965	Applied For Not Applicable	
Sulte, Apt. #, etc.		27	4			5. Certificate of Status Desired	Feo Re	Additional equired
City & State 23		28				Election Campaign Financing Trust Fund Contribution	Fund Contribution	
Zip 24	Country 25	29 Zip		Country 30		l	Yes 🗌 No	. 199.032,
THE LAW F	ime and Address of Cur IRM OF LAWRENCE J IA AVENUE BLES FL 33134			ll	rool Addre 43	10. Name and Address of New Re- PEGORY X PEN SS (P.O. Box Number is Not Acceptate ALMERIA AVE.)	RSOU	36,
SIGNATURE SIMILURG	y color frighed had of registered	agent and title if applica		es, the above-na julhorized by the grida Statutes.	med corpo corporatio		28, 1997	-
STREET ADDRESS 343 A	SON, GREGORY LMERIA AVENUE SUIT L GABLES FL	TE 636	□ DELÉTE	13. 1.1 THLE 1.2 NAME 1.3 STREET ADDI 1.4 CITY - S1 - ZIP	i	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTOR Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDR 2.4 CITY-ST-ZI	1		Change Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DETELE	B.1 TITLE B.2 NAME 3 3 STREET ADDR 3 4. CITY - ST - ZIF			Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DELETE	4.1 TIPLE 4.2 NAME 4.3 STREET ADDR	uess .		☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DETEJE	5.1 TITLE 5.2 NAME 5.3 STREET ADDR 5.4 CITY - ST - ZIP	iss .		Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDE 6.4 City-St-2ip			Change	Addition
14 I do hereby certify	that the information supplied on this annual report of the corporation 12 or Block 13 if charged	lied with this filing or topplemental a for the requiver of or on the attachn	does not qualification to the control of the contro	v for the evennt	on stated in and that report	n Section 119.07(3)(i), Florida Statute ny signature shall have the same lega as required by Chapter 607, Florida S	s. I further certify that I effect as if made un tatutes; and that my r	the der oath; that name

CICMATUDE.

APAL 28 /97

FILED

May 08 1997 8:00am

Secretary of State