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

PROFIT CORPORATION ANNUAL REPORT

1997

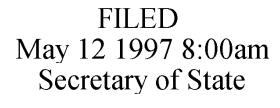


FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000067275 (4)



MITZIA I Principal Place 3911 JOG RD GREEN ACRES US	ENTERPRISES CO.	1016	ing Address GOTH WAY IT PLAM BEACH FL	33407-6618	<u></u>						
			4					 Date Incorporated or Qualified 08/30/1995 		e of Last I	
	sce of Business	(+m)	Mailing Address					4. FEI Number 65-0605859		F	pplied For
Suite, Apt	A Oliv	-	suite, Ant. #, etc.			 	\dashv	5. Certificate of Status Desired		\$8.75	ot Applicable Additional legulred
City & State)	27	City & State	·		·	-	6. Election Campaign Financing			May Be
23		28						Trust Fund Contribution			to Fees
Zip 24	Country 25	29	t ip	30 Cou	ntry	1		 This corporation has liability for Florida Statutes 	r intangible t		s. 199.032,
	9. Name and Address of Curre	ent Registe	red Agent					10. Name and Address of New F	legistered A	gent	
1016	RY, CINDY 3 10TH WAY 5T PALM BEACH FL 33407				81 82 83		A	\$ (P.O. Box Number is Not Accept	able)		
					64	City			FL	85 Zip	Code
SIGNATURE	to the provisions of Sections 607.05 egistered agent, or both, in the Stam familiar with, and accept the oblining of the stamps of the section of the sectio	602 and 607 te of Florida gations of, to generate the control of the control of the left o						ation submits this statement for the 's board of directors. I hereby acc when reinstating)	purpose of ept the appo	changing pintment as	its registered s registered
12.	Signature hyperi or plint ad Jame of registered a OFFICERS A			13.	A A C	eni signalure rec	Jureo .	ADDITIONS/CHANGES TO OFF		DIRECTO	RS IN 12
BRUE	PSTD		DELETE	1.1 10	TLE.					Change	Addition
NAM:	EDERY, TUNG			1.2 N							
STHEET ADDRESS	1016 10TH WAY WEST PALM BEACH FL 334	07				ADDRESS					
CHY-51-70P	THE TITLE BETWEEN TE OUT		DELETE	2.1 TI		ST-ZIP				Change	Addition
NAME				2.2 N/	AME						
STREET ADDRESS				2.3 ST	REET	ADDRESS					
CITY - ST - ZIP	and for a second		DELETE	*****		ST - ZIP				Casasas	Addition
TITLE			in orrese	3.1 Ti		1				Change	Addition
STREET ADORESS						ADDRESS					
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NAME				4.2 N		l l					
STREET ADDRESS						ADDRESS					
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TiffLE			☐ DELETE	6.1 TI	TLE					Change	Addition
NAME				6.2 N/	ME	}					ľ
STREET ADDRESS						I ADDRESS					
CITY-ST-7IP		- d - M. H.				T-ZIP	- 4 1	Section 119.07(3)(i), Florida Statu		- 13 11	v

4. Loo 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 annual report or supplemental annual report is frue 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 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED IN MIE OF BIGNING OFFICER OR DIRECTOR

Daytime Phone #

0300071