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

Mailing Address

9420 S.W. 77TH AVENUE

MIAMI FL 33156-7988

2a. Mailing Address

City & State

Zip

Suite, Apt. #, etc.

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9. Name and Address of Current Registered Agent

**PROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P95000070610 (7)

CLR VENTURES, INC.

Principal Place of Business

2. Principal Place of Business

25

Suite, Apt. #, etc.

SIGNATURE:

City & State

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 $Z\phi$ 

9420 S.W. 77TH AVENUE

MIAMI FL 33156-7903

81 Name LIPPMAN, WAYNE D 9420 S.W. 77TH AVENUE 82 Street Addres MIAMI FL 33158-7903 83 City 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corpor office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation agent. Lam lamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes. Sugremate type of or printed name of registered agent and title if applicable. (NOTE Registered Agent a gnature required 12. OFFICERS AND DIRECTORS 13. DELETE THLE 1.1 TITLE COUFF, STUART 1.2 NAME NAME 9420 SW 77 AVE 1.3 STREET ADDRESS STREET ADDRESS miami fil 1.4 CITY-ST-ZIP CHY-ST-209 DELETE THEE dvs 2.1 TITLE NAME LIPPMAN, WAYNE 22 NAME 9420 SW 77 AVE STREET ADDRESS 2.3 STREET ADDRESS CITY - ST - ZIE miami fl 2.4 CITY-ST-ZIP DELETE THLE 31 TITLE ROSENBAUM, DAVID 32 NAME 9420 SW 77 AVE STREET ADDRESS **3.3 STREET ADDRESS** MIAMI FL 3 4. CITY-ST-ZIP CITY-ST-ZIE DELETE 4.1 TITLE HILE NAME 4. 2 NAME 4.3 STREET ADDRESS STREET ALIGNESS 4.4 CITY-ST-ZIP CHIT-ST ZIP DELETE DOLE 5.1 TITLE NAME 52 NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY-ST-ZIP C-TY - 51 - 708 DELETE 6.1 TITLE Change Addition THILE 6.2 NAME NAME STREET ADDRESS **6.3 STREET ADDRESS** 6.4 CITY-ST-ZIP C(1Y - S1 - 7)P 14. I 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. 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 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 auto-inment with an address.

OR DIRECTOR

Country

30

**FILED** May 02 1997 8:00am Secretary of State

3.	Date Incorporated or Qualified 09/13/1995	<b>3a.</b> Date of Last Report <b>05/01/1996</b>				
4.	FEI Number		]	Ap	plied For	
	<b>65-0618915</b>				t Applicable	
5.	Certificate of Status Desired	ХX			Additional equired	
6.	Election Campaign Financing Trust Fund Contribution		,		May Be to Fees	
 B.	This corporation has liability for	intanoih				
-		Yes	□ No		, 100.002,	
10.	Name and Address of New R	egistere	d Agen	1		
s (F	O. Box Number is Not Accepta	ble)				
		F	85	Zip (	Code	
atio	n submits this statement for the	purpose	of char	L oina it	s registered	
i's t	poard of directors. I hereby acce	pt the ap	pointm	ent as	registered	
wher	reinstating)	DATE				
	ADDITIONS/CHANGES TO OFF	CERS A				
				hange	Addition	
				hange	Addition	
•					1 deletion	
			шч	hange	Addition	
				banna	Addition	
				hange	ווטוויטטא נ	

Wayne D. Lippman 4/22/97 (305) 274-7277

Daytime Phone #