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

PROFIT CORPORATION ANNUAL REPORT

1997



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

Principal Place of Business 10515 SOUTHWEST 138 COURT MIAMI FL 33186 Mailing Address 10515 SOUTHWEST 138 COURT MIAMI FL 33186-3162						
					3. Date Incorporated or Qualified 10/10/1995	3a. Date of Last Report 04/29/1996
2. Principal P	lace of Business	28. Mailing Address			4. FEI Number 65-0613491	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	0	City & State			6. Election Campaign Financing	\$5.00 May Be
Zip	Country Zip		Count	ry	Trust Fund Contribution 8. This corporation has liability for i	ntangible tax under s. 199,032,
24	25 9. Name and Address of Current	[29]	30		10. Name and Address of New Reg	Yes No
	ALMERIA AVENUE RAL GABLES FL 33134		8	3	dress (P.O. Box Number is Not Acceptab	FL 85 Zip Code
11. Pursuant office or ragent. La	to the provisions of Sections 607 (1502 ogistered agent, or both, in the State of m familiar with, and accept the obligat Signature typed or priord name of repeated agent.	lions of, Section 607.0505, F	Torida Statut	es	poration submits this statement for the p ation's board of directors. Thereby accep ared when reinstating)	urpose of changing its registered it the appointment as registered
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12
NAME STREET ADDRESS	PTD GLAZE, THOMAS R SR. 10515 SOUTHWEST 138 COUF MIAMI FL 33186	[] DELETE		ET ADDRESS		☐ Change ☐ Addilion
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	VSD GLAZE, JANET P 10515 SOUTHWEST 138 COUP MIAMI FL 33186	☐ DELETE	2 1 THE 2.2 NAM 2.3 STHE 2.4 CHY	E ET ADDRÉSS		Change Addition
TITLE NAME STREET ADDRESS	MD4111 1 2 30 100	DELETE	31 TIT(! 32 NAM 33 STRE	E F1 ANDRESS		Change Addit-on
TITLE NAME STREET ADDRESS		☐ DECETE		NE ET ADDRESS		☐ Charige ☐ Addition
TITLE NAME STREET ADDRESS		DEFETE		E ELADORESS		Change Addition
CITY+\$1-ZIP TITLE		DELETE	5.4 CITY 6.1 TALE			Change Addition

14. I do hereby certify that the information supplied with this filling 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 attachment with an address.

STREET ADDRESS

4-5-97

Apr 15 1997 8:00am

Secretary of State