FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996

SIGNATURE: 🗡



FLORIDA DEPARTMENT OF STATE
Sance 3 B Mortham
Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P95000079546 (4) BEKULI ENTERPRISES, INC.					
Principal Place of Business 7185 WEST OAKLAND PARK BLVD. LAUDERHILL FL 33316		Mailing Address 7185 West Oakland Park Blyt. Lauderhill fl 33318			
					Date of Last Report
¬ .	ace of Business	2a. Mailing Address		10/17/1995 4. FEI Number 6053	Applied For
Suite, Apt. #	t etc	Suite, Apt. #, etc		620012003	Not Applicable
	·, otc.	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
Zip	Country	Zip	Country	8. This corporation has liability for intangit	
	9. Name and Address of Curre	29	30	Florida Statutes Yes N 10. Name and Address of New Registe	
"THE LAW FIRM OF LAWRENCE J SPIEGEL CHRTD 343 ALMERIA AVENUE CORAL GABLES FL 33134			82 Street Add 83	ress (P.O. Box Number is Not Acceptable)	85 Zip Code
or registere familiar witl IGNATURE	ed agent, or both, in the State of Flori h, and accept the obligations of, Sec	da Such change was authoriz hori 607.0505, Horida Statufes	eo by the corporation's boa	ration submits this statement for the purpose o and of directors. I hereby accept the appointmen	f physician its registered office
2 .	Signature, typed or proted name of registered agen OFFICERS AN	D DIRECTORS	TE Forgistional Agent sign in ire reduce	ADDITIONS/CHANGES TO OFFICERS	
TLE	PTD	☐ DELETE	1 1 TOLE		Change Addition
AME TREET ADDRESS	LIEBERMAN, BETTY R 7185 WEST OAKLAND PARK	BLVD.	1.2 NAME 1.3 STREET ADDRESS		
TY-ST-ZIP TLE	VSD LAUDERHILL FL 33316	☐ DELETE	1 4 CHY - ST - ZIP 2 1 TITLE		
AME TREET ADDRESS ITY-ST-ZIP	LIEBERMAN, KURT 7185 WEST OAKLAND PARK LAUDERHILL FL 33316		2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP		☐ Change ☐ Addition
TLE NME REET ADORESS		☐ DELETE	3 1 TIFLE 32 NAME 33 STREET ADDRESS	7	Change Addition
TY-ST-ZIP FLE UME	····	DELETE	34 CTY - ST 7 IP 4 1 TITLE 4 2 NAME		Change Addition
REET ADDRESS			4.3 STREET ADDRESS		
LE		DELETE	4 4 C(TY - ST - 7)P 5 1 T(TLE		Change Addition
ME			5.2 NAME		_ • L
REE! ADDRESS			5.3 STREET ADDRESS		
TY-\$T-ZIP		f no ere	5.4 CHY - \$1 - 2IP		
TLE AME REET ADDRESS		☐ DELETE	6 1 TITLE 6 2 NAME 6 3 STREET ADDRESS	500001859! -06/12/9601040 ***200.00	Change Addition
certify that	the information indigrifed on this anni	⊎al report or supplementa, anni	ual report is true and accur-	for the exemption stated in Section 119.07(3)(k) ate and that my signature shall have the same k is report as required by Chapter 607, Florida St	. Florida Statutes. I further

NO TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR