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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1996

DIVISION OF CORPORATIONS

I. Corporation Name	F93000000417	(5

Principal Place 255 EAST	FLAGLER ST.	Mailing Address 255 EAST FLAGLER	ST.		
MINIMI FL S	3131	MIAMI FL 33131		3. Date Incorporated or Qualified 10/19/1995	3a. Date of Last Report
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65.06/4841	Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & Stat	<u>(</u>	City & State:		6. Election Campaign Financing	Fee Required  \$5.00 May Be
3		28	· ·	Trust Fund Contribution	Added to Fees
Zip Zil	Country	Zip	Country	8. This corporation has liability for	
4	25   9. Name and Address of Cur	29 rent Registered Agent	30	Florida Statutes Yes  10. Name and Address of New I	<b></b>
· <del></del>			81 Name		TO BOTTO A SOLIC
	DRATE CREATIONS ENTERPRI	SES, INC.		ress (P.O. Box Number is Not Acceptal	ble)
	GA BLVD.		/0	295 COLLINS	AVE. #1519
SUITE	211 BEACH GARDENS FL 33418		83		
TALM	DEACH CANDERS TE 33418		84 City	LAAS O	B5 Zip Code
11. Pursuant	to the provisions of Sections 607.03	502 and 607.1508, Florida Statut	es, the above-named corpor		Irpose of changing its registered office.
or registe familiar w	red agent or both in the State of Fi ith, and adoept the soligations of S	lorida. Such change was authoriz cotion 607.0505. Florida Statutes	ed by the corporation's boar	ration submits this statement for the purific of directors. I hereby accept the app	pointment as registered agent. I am
SIGNATURE.	Kusta X	Den Yo	ISTEN PIX	EN	4/17/96
	Signature, typed or printed name of registered a				
10			TE: Registered Agent signature requires	· · · · · · · · · · · · · · · · · · ·	D4 t
		AND DIRECTORS	13.	d when reinstating) ADDITIONS/CHANGES TO OFF	
IITLE	OFFICERS /		13. 1.1 TITLE	· · · · · · · · · · · · · · · · · · ·	DATE  ICERS AND DIRECTORS IN 12  Change Addition
TILE EAME	OFFICERS A	AND DIRECTORS	13.	· · · · · · · · · · · · · · · · · · ·	
TILE IAME STREET ADDRESS	D ROSEN, KRISTEN	AND DIRECTORS	13. 1. 1 TITLE 1.2 NAME	· · · · · · · · · · · · · · · · · · ·	
TILE RAME STREET ADDRESS CTY-ST-ZIP	OFFICERS A D ROSEN, KRISTEN % 255 EAST FLAGLER ST	AND DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	· · · · · · · · · · · · · · · · · · ·	
ITLE IAME STREET ADDRESS STY-ST-ZIP	OFFICERS A D ROSEN, KRISTEN % 255 EAST FLAGLER ST	AND DIRECTORS DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-SI-ZIP	· · · · · · · · · · · · · · · · · · ·	☐ Change   Addition
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TILE  JAME	OFFICERS A D ROSEN, KRISTEN % 255 EAST FLAGLER ST	AND DIRECTORS  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP	· · · · · · · · · · · · · · · · · · ·	☐ Change ☐ Addition ☐ Change ☐ Addition
ITILE  NAME STREET ADDRESS CTY-ST-ZIP TILE NAME STREET ADDRESS CTY-ST-ZIP TLE	OFFICERS A D ROSEN, KRISTEN % 255 EAST FLAGLER ST	AND DIRECTORS DELETE	13.  1. 1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST-ZIP 2 1 TITLE 22 NAME 23 STREET ADDRESS 2.4 CITY - ST-ZIP 3.1 TITLE	· · · · · · · · · · · · · · · · · · ·	☐ Change   Addition
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ITILE NAME STREET ADDRESS	OFFICERS A D ROSEN, KRISTEN % 255 EAST FLAGLER ST	AND DIRECTORS  DELETE  DELETE	13. 1. 1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-SI-ZIP 2 1 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-SI-ZIP 3.1 TITLE 32 NAME 3.3 STREET ADDRESS	· · · · · · · · · · · · · · · · · · ·	☐ Change ☐ Addition ☐ Change ☐ Addition
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112.  ITHE  NAME  STREET ADDRESS  CHY-ST-7IP  THE  NAME  STREET ADDRESS  CHY-ST-ZIP  THE  NAME  STREET ADDRESS  CHY-ST-ZIP  THE  NAME  STREET ADDRESS  CHY-ST-ZIP  THE  NAME	OFFICERS A D ROSEN, KRISTEN % 255 EAST FLAGLER ST	AND DIRECTORS  DELETE  DELETE	13. 1. 1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-SI-ZIP 2 1 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-SI-ZIP 3.1 TITLE 32 NAME 3.3 STREET ADDRESS	· · · · · · · · · · · · · · · · · · ·	☐ Change ☐ Addition ☐ Change ☐ Addition
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ITLE NAME STREET ADDRESS STY-ST-ZIP STREET ADDRESS STRY-ST-ZIP TLE NAME STREET ADDRESS STRY-ST-ZIP TLE NAME TREET ADDRESS STRY-ST-ZIP TLE TREET ADDRESS	OFFICERS A D ROSEN, KRISTEN % 255 EAST FLAGLER ST	AND DIRECTORS  DELETE  DELETE	13.  1. TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2 1 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP 3. TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP 4 1 TITLE 42 NAME 43 STREET ADDRESS	· · · · · · · · · · · · · · · · · · ·	Change Addition  Change Addition  Change Addition  Change Addition
THE NAME  STREET ADDRESS CTY-ST-ZIP  THE  NAME  STREET ADDRESS CTY-ST-ZIP  THE	OFFICERS A D ROSEN, KRISTEN % 255 EAST FLAGLER ST	AND DIRECTORS  DELETE  DELETE  DELETE	13.  1. TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2 1 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP 3.1 TITLE 32 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 42 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	ADDITIONS/CHANGES TO OFF	Change Addition  Change Addition  Change Addition  Change Addition
ITILE VAME STREET ADDRESS D-TY-ST-7IP TILE VAME STREET ADDRESS DITY-ST-7IP TILE VAME STREET ADDRESS DITY-ST-7IP TILE VAME VAME VAME VAME VAME VAME VAME VAM	OFFICERS A D ROSEN, KRISTEN % 255 EAST FLAGLER ST	AND DIRECTORS  DELETE  DELETE  DELETE	13.  1. TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3. TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE	ADDITIONS/CHANGES TO OFF	Change Addition  Change Addition  Change Addition  Change Addition
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ITLE FAME THEET ADDRESS FTY-ST-ZIP TILE THEET ADDRESS TTY-ST-ZIP TILE THEET ADDRESS	OFFICERS A D ROSEN, KRISTEN % 255 EAST FLAGLER ST	AND DIRECTORS  DELETE  DELETE  DELETE	13.  1. TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-SI-ZIP 2 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-SI-ZIP 3. TITLE 32 NAME 3.3 STREET ADDRESS 34 CITY-SI-ZIP 4.1 TITLE 42 NAME 4.3 STREET ADDRESS 4.4 CITY-SI-ZIP 5.1 TITLE 52 NAME 53 STREET ADDRESS 4.4 CITY-SI-ZIP 6.1 TITLE 6.1 TITLE 6.1 TITLE	ADDITIONS/CHANGES TO OFF	Change Addition  Change Addition  Change Addition  Change Addition
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ITILE  NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS OTTY-ST-ZIP THE HAMME STREET ADDRESS OTTY-ST-ZIP THE HAMME STREET ADDRESS OTTY-ST-ZIP THE	OFFICERS A D ROSEN, KRISTEN % 255 EAST FLAGLER ST	AND DIRECTORS  DELETE  DELETE  DELETE	13.  1. TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-SI-ZIP 2 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-SI-ZIP 3. TITLE 32 NAME 3.3 STREET ADDRESS 34 CITY-SI-ZIP 4.1 TITLE 42 NAME 4.3 STREET ADDRESS 4.4 CITY-SI-ZIP 5.1 TITLE 52 NAME 53 STREET ADDRESS 4.4 CITY-SI-ZIP 6.1 TITLE 6.1 TITLE 6.1 TITLE	ADDITIONS/CHANGES TO OFF	Change Addition  Change Addition  Change Addition  Change Addition

certify that the information indicated on this armust report or supplemental armust report is true and accurate and that my signature shall have the same legal effect as if made under cath; that I am an officer or director of the corporation of the receiver or trustee empowered to execute this report as required by Chanter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: