## 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 # P95000091318 (2)

EDUAR	DO, INC. De of Business IST AVE.	Mailing Address 13005 S.W. 61ST AVE. MIAMI FL 33156-7171			
i mirimi (C 50)	~	111		3. Date Incorporated or Qualified	3a. Date of Last Report
				11/30/1995	05/01/1996
	Place of Business	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt	Al	Suite, Apt. #, etc.		65-0632913	Not Applicable
22	#, Q(C	27 Suite, Apr. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Sta	te	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28	,	Trust Fund Contribution	Added to Fees
Zip	Country	}	Country	8. This corporation has liability fo	r intangible tax under s. 199.032,
24	25 9. Name and Address of Curre	29 of Registered Agent	30	Florida Statutes  10. Name and Address of New R	Yes No
CO	RPORATION SERVICE COMPAN		81 Name	Robert M. Deeh]	
1201 HAYS STREET			62 Street Add	dress (P.O. Box Number is Not Accepta	able)
TALLAHASSEE FL 32301-2525				13005 S.W. 61st	Ave.
			83	Milmi, an oil	
			84 City	Miami, FL	FL 85 Zip Code 6 33156
11. Pursuant	to the provisions of Sections 607.05	02 and 607.1508, Florida Statute	es, the above-named co		
office or agent 1 a	registered agent, or hoth, in the State am familiar with, and agreet the born	e of Florida. Such change was a gations of, Section 607.0505, Flo	authorized by the corpora orida Statutes.	rporation submits this statement for the ation's board of directors. I hereby according to the control of the c	ept the appointment as registered
SIGNATURE	* (ISVIM)	1 Juch			118197
12.		per and discrepticable (NOTI	E. Registered Agent's gnature req	u.red when reinstahing) ADDITIONS/CHANGES TO OFF	ICERS AND DIRECTORS IN 12
THLE	D	DELETE	1.1 TITLE	ADDITIONS OF INTEGER TO OFF	Change Addition
NAMÉ	DEEHL, ROBERT M		1.2 NAME		
STREET ADDRESS	13005 S.W. 61ST AVE.		1.3 STREET ADDRESS		
CITY - S1 - 70P	MIAMI FL 33156		14 CITY - ST - ZIP		
DILE	D JACOBSON, ULA D	☐ DELETE	21 TITLE		Change Addition
NAME STREET APORESS	13005 S.W. 61ST AVE.		2 2 NAME 2.3 STREET ADDRESS		
CITY - ST - 2IF	MIAMI FL 33158		2. 4 CITY - ST - ZIP	•	
TITLE		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREE* ADDRESS			3 3 STREET ADDRESS		
CiTY+ST+7IP		DELETE	3.4. CITY-ST-ZIP 4.1 TITLE		Change Addition
NAME		—) berrie	4.1 milk 4.2 name		C comple C vonting
STREET ADDRESS			4.3 STREET ADDRESS		
CITY - ST - ZIP			4.4 GITY-ST-ZIP		
TOT_E		☐ DELETE	5 1 TITLE		☐ Change ☐ Addition
NAME			52 NAME		
STREET ADDRESS			5 3 STREET ADDRESS		
CHY-ST-ZiP Title		DELETE	6.1 TITLE		Change Addition
NAME		- pecet	6.2 NAME		المادان ويبيا
STREET ADORESS			6 3 STREET ADDRESS		
	1				

14. I do hercely 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 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 charged, or on an attachment with an address.

SIGNATURE:

FFICER OR DIRECTOR AS

1/8/97 305-667-0733

**FILED** 

Feb 05 1997 8:00am

Secretary of State