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

COF ANNL	PROFIT RPORATION JAL REPORT 1996		B. Mortham iry of State	, .			
DOCUI 1. Corporation	MENT # P95000	094989 (7)			1 JBB///BB/ (18 (8:8) 6:/// 88/// 88/// 88///	IRKUR JANK ANDIG KARAN NANKA NAK NAGI	
Principal Place of Business Ma'ling Address 22620 S.W. 126TH AVENUE 22620 S.W. 126TH AVENUE MIAMI FL 33170 MIAMI FL 33170							
					3. Date incorporated or Qualified 12/12/1995	Date of Last Report	
2. Principal Pla	nl Place of Business 2a. Mailing Address 26				65-0631625	Applied For Not Applicable	
Suite, Apt. 22 City & State	27			· · · • · · · · · · · · · · · · · · · ·	5. Certificate of Status Desired	Fee Required	
Zip	28		Country		Flection Campaign Financing Trust Fund Contribution This corporation has liability for intan	\$5.00 May Be Added to Fees gible tax under s 199.032,	
24	9. Name and Address of Current	29 Registered Agent	30] No	
RICHARDSON, PERRI 22620 S.W. 126TH AVENUE MIAMI FL 33710			81 82 83	Street Addre	Address (P.O. Box Number is Not Acceptable)		
or registeri familiar wit SIGNATURE	o the provisions of Sections 607.0502 a ed agent, or both, in the State of Florida th, and accept the obligations of, Section Signature, typed or printed name of registered agont an	. Such change was authorize n 607.0505, Florida Statutes	d by the corp	L named corpora oration's board orative received	tion submits this statement for the purpose of of directors. Thereby accept the appointnuction of the suppoint of the suppose of the supp	e of changing its registered office nent as registered agent. I am	
12. TITLE	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICER		
NAME STREET ADDRESS CITY-ST-ZIP	RICHARDSON, TOBY J 22620 SW 126TH AVENUE MIAMI FL 33170		1. 1 TIFLE 1 2 NAME 1 3 STREET 1 4 CHY-S			☐ Change ☐ Addition .	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD RICHARDSON, PERRI 22620 S.W. 126TH AVENUE MIAMI FL 33170	DELFTE	2 1 TRILE 22 NAME 23 STREET	ADDRESS		Change Addition	
TITLE NAME STREET ADDRESS		□ DELETE	24 CPY - S 3 1 TI*LE 32 NAME 33 STREF	i address		Change Addition	
CITY-S1-ZIP TITLE NAME		DELETE	3 4 GiTY-S 4 1 TITLE 4 2 NAME	31 - Z4P		Change Addition	
STREET ADDRESS CHY-ST-ZIP TITLE		☐ DELFIE	4.3 STHEET 4.4 CHTY-S 5.1 THLE	1		☐ Change ☐ Addition	
NAME STREET ADDRESS CITY-ST-7IP			5.2 NAME 5.3 STREET 5.4 CITY - S			71. m. 3-19-96	
TITLE NAME STHEET ADDRESS CITY - ST- ZIP		☐ DELETE	6 1 TILLE 6.2 NAME 6.3 STREET 6.4 CITY - S	ADORESS 1-2IP	800001750 -03/20/9601017 ***200.00	DSSB Addition	
					the exemption stated in Section 119,07(3) and that my signature shall have the sam		

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 changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR