## FILE NOW: FILING FEE AFTER MAY 1 IS \$550 00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT

Courter D. Marriellan

Secretary of State

DIVISION OF CORPORATIONS

## FILED May 02 1997 8:00am Secretary of State

DOCUMENT # P9600004926 (7) 1. Corporation Name						3. Date Incorporated or Qualified  3a. Date of Last Report			
2. Principal Pl	Jace of Business	2a. Mailing	Address	····		01/16/1996 4. FEI Number		Appli	ied For
21		26	Tail			65.0642678			Applicable
Suite, Apt.	#, eld	k	Suite, Apt. #, etc.			5. Certificate of Status Desired		<b>.75</b> Add 69 Requ	
City & State		City & 5	State			6. Election Campaign Financing	<del></del>	5.00 M	
23		28				Trust Fund Contribution		dded to I	
Zip	Country	Zip		Countr	У	8. This corporation has liability for		ider s. 19	99.032,
24	25   9. Name and Address of Cui	29] rrent Registered Ad		30		Florida Statutes  10. Name and Address of New Re	Yes No		
AVE  11. Pursuant office or ragent Ta	03 BISCAYNE BLVD. NTURA FL 33180 to the provisions of Sections 607. egistered agent, or both, in the Si m familiar with, and accept the of	0502 and 607.1508, late of Fiorida. Such oligations of, Section	Fiorida Statule I change was a In 607.0505, Flo	83 84 es, the above uthorized brida Statute	3 City	dress (P.O. Box Number is Not Accepta reporation submits this statement for the ation's board of directors. I hereby acce	FL  85	Zip Coo ging its n ent as req	1
SIGNATUR	Signaturi. Typical or printed search of registerno		e (NOTE		pent signature raqu	uired when reinstating)	DATE		
12,	OFFICERS PD	AND DIRECTORS	DELETE	13.	<del></del>	ADDITIONS/CHANGES TO OFFI	CERS AND DIRE		IN 12 Addition
NAME STREET ADDRESS CITY-ST-7FF	KRIEFF, RICHARD 19900 NORTHEAST 23RD / NORTH MIAMI BEACH FL 3		בי סבננונ	1.2 NAME	T ADDRESS		ان پ	minîc f	Addison
THE NAME STREET ADDRESS ONY: STEZIP	VD NATHENSON, JAMES M 777 BAYSHORE DRIVE, SU FORT LAUDERDALE FL 33:		□ DELETE	2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY	T ADDRESS		□ CI	nange [	Addition
TOLE NAME STREET ADDRESS	VD BARATZ, LAWRENCE 5342 NORTHWEST 28TH C BOCA RATON FL 33496		DELETE	3 1 TITLE 3 2 NAME 3.3 STREE	T ADDRESS			nange	Addition
CITY - ST - ZIP TITLE	DOOR TATION IL 00780		DELETE	3.4. CITY-	- 31 - ZIF		□ci	nange [	Addition
NAME				4 2 NAMI	:				]
STREET ADORESS				4.3 STREE	1 ADDRESS				
COTY \$7-70P			DECETE	4.4 CITY-	ST - ZIP			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Addition
name Street address			∐ DÉLETE	1	T ADDRESS		[] 0	iarige [	Addition
CITY-ST-7IP TITLE NAME STREET ADDRESS			DELETE	5.4 CITY- 6.1 TITLE 6.2 NAME 6.3 STREE				iange [	Addition
CITY ST-Zir 14. I do heret	by certify that the information subj	plied with this filing	does not qualify	6.4 CiTY-		ed in Section 119.07(3)(i), Florida Statute	s. I further certif	v that the	e

4. I do hereby 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 or finis agricular eport or supplier 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 dispersion to the corporation or the recipier or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 17 or Block 18 if changed, or an annual accurate my address.

SIGNATURE

NATURE AND TYPED OF PRINTED NAME OF DIGNING OFFICER OF DIRECTOR

4-26-97 6

(305) 932 - 0807

0244241