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 # P9600006941 (4)

LONGHAND, INC.

Principal Plane of Business
19401 NE 1ST COURT

SIGNATURE:

Mailing Address

19401 NE 1ST COURT MIAMI FL 33179 19401 NE 1ST COURT MIAMI FL 33179-3217

FILED Feb 24 1997 8:00am Secretary of State



						3. Date Incorporated or Qualified 3a. Date of Last Report 01/23/1996		
2. Principal P	Jace of Business	2a. Mailing Address			4. FEI Number		Applied For	
21 814	O CLEARY BLUD	26 8140 CLEI	4041	BLVD	. 65-063576	5	Not Applicable	
22 14 C	Seile Apt # etc. Suite, Apt. #, etc. 27 / 90 / etc.				5. Certificate of Status Desired Security Securi			
City & State City & State 23 PLANTATION, FL 28 PLANTATION, 1				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
3336	24 Country 25 USA	29 33324	Country 30	SA	This corporation has liability to Florida Statutes	r intangible tax and	der s. 199.032,	
	9. Name and Address of Current	Registered Agent	-41		10. Name and Address of New R	egistered Agent		
ROSENKRANZ, SUSAN 19401 NE 1ST COURT MIAMI FL 33179				82 Street Address (P.O. Box Number is Not Acceptable) # 140/				
omee or r	to the provisions of Sections 607.0502 egistered agent, or both, in the State o in familiar with and ascept the o g gal	t Florida. Such change was au	ithorized by	the corpor	orporation submits this statement for the ration's board of directors. I hereby according to the ration's board of directors are recorded to the ration's board of directors.	purpose of changi ept the appointmen	ing its registered it as registered	
SIGNATURE		marke				2/18/9	/	
12.	Signature: type of or a rested trace of register Lighent OFFICERS AND	· · · · · · · · · · · · · · · · · · ·	13.	it signature req	(uired when reinstating) ADDITIONS/CHANGES TO OFF	DATE /	TORS IN 12	
TOLE	PSD	DELETE	1.1 TITLE	<u> </u>	ADDITIONS/CITANGES TO OFF	CENS AND DIREC		
NAME	ROSENKRANZ, SUSAN		1.2 NAME			$\tau \Sigma$. 17	
STREET ADDRESS	19401 NE 1ST COURT		1.3 STREET	ADDRESS	8140 CLFANY BL	we The	101	
CHY-ST-ZIP	MIAMI FL 33179		1.4 CITY - ST	-7IP	8140 CLEANY BL PLANTATION, FL	33329	/	
Titel		☐ DELETE	2.1 TITLE			☐ Chai	inge Addition	
NAME			2.2 NAME					
STREET ADDRESS			2.3 STREET	ADDRESS				
C DY-ST-ZIP			2 4 CITY-S	1 - ZIP				
TITLE		DELETE	3 1 TITLE			☐ Chai	inge Addition	
NAMi			3.2 NAME					
STREET ACORESS			3.3 STREET	ADDRESS				
C171 - SE- ZIP			3 4. CITY-S	1 - ZIP				
10116		☐ DELETE	4.1 TITLE			Cha	inge 🔲 Addition	
NAM:			4. 2 NAME					
STREET ADDRESS			4.3 STREET A	NDORESS				
C-11-S1-20P			4.4 CITY-ST	· ZIP				
1011		☐ DEFEATE	5.1 TITLE			Cha	inge 🔲 Addition	
NAM:			5.2 NAME					
STREET ADDRESS			5.3 STREET	ADDRESS				
CCTY+ST+7IP			5.4 CITY-ST	- ZIP				
TILL		DELETE	6.1 TITLE			☐ Chai	inge 🔲 Addition	
NAME			6.2 NAME	1				
STREET ADDRESS			6.3 STREET	ADDRESS				
C(IY - ST - 7)P			6.4 CITY-ST	1				
14. I do heret	by certify that the information supplied	with this filing does not qualify	for the ever	ontion state	ed in Section 119.07(3)(i), Florida Statut	es. I further certify	that the	
informatio Lam an et	n indicated on this annual regort or su	pplemental annual report is tru ne receiver or trustee empowe	red to execu	ate and th	ed in Section 119.07(3)(1), Florida Statut at my signature shall have the same leg ort as required by Chapter 607, Florida	al effect as if made Statutes; and that j	a under eath: th	