## 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 # P96000010761 (0)

GUNS F Principal Place 1022 SW 128T MIAMI FL 3318	H AVE	Mailing Address 1022 SW 128TH AVE MIAMI FL 33184-2227			
				3. Date Incorporated or Qualified 3e 01/31/1996	. Date of Last Report
2. Principal P	lace of Business	2a. Mailing Address	1819	4. FEI Number 65 - 0645204	. Applied For
21 Suite, Apt	# ele	Suite, Apt. #, etc.			Not Applicable \$8.75 Additional
22		27		Certificate of Status Desired	Fee Required
City & State	е	City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for intang	gible tax under s. 199.032,
24	9. Name and Address of Cur	29   rent Registered Agent	30	10. Name and Address of New Register	No red Agent
102	TTEZA, VOSE I F 2 SW 128TH AVE MI FL 33184	ORTEZA, JOSE I.	<u> </u>	ress (P.O. Box Number is Not Acceptable)	EL 85 Zip Code
11. Pursuant office or agent. La SIGNATURE	Squares, Typica or proceed name of registerior		ites, the above-named corp authorized by the corporal lorida Statutes.  TE Fing stered Agent signature requirements.	coration submits this statement for the purpo- tion's board of directors. I hereby accept the red when renstating) Dr ADDITIONS/CHANGES TO OFFICERS	NE .
THEF	PRESIDENT	DELETE	1.1 TITLE	وه وواده ها در	Change Addition
NAME STREET ADORESS	FORTEZA, JOSE 1022 SW 128th	Ave.	1.2 NAME 1.3 STREET AODRESS		
C(1Y-S1-ZII)	мфамф, <sub>FL</sub> 3318	4 DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		Change Addition
NAME			2 2 NAME		
STHEET ADDRESS			2.3 STREET ADDRESS 2.4 CITY+ST-ZIP		
TITLE	The second secon	DELETE	3.1 TITLE		Change Addition
NAME .			3.2 NAME		
STREET ADDRESS Offy-ST-ZIP			3 3 STREET ADDRESS ) 3 4. CITY-ST-71P		
1011		DELETE	4.1 TITLE		Change Addition
NAME			4, 2 NAME		
STREET ADDRESS			4.3 STREFT ADDRESS		
CITY-S1-Z61 TOLE	amount ( )	DELETE	4.4 CITY - ST - ZIP 5.1 TITLE		Change Addition
NAMÉ			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CHY-ST-ZIP		DFLE1E	5.4 CITY-ST-ZIP		Change Addition
TITLE NAME		F"] Nere is	6.1 TITLE 6.2 NAME		C anguiða C'T Worlflox
STREET ADDRESS			6.3 STREET ADDRESS		
2.114 1 7 3 3 1 4 0 0		,			

64 CITY-ST-ZIP

14. If 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. If 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 changed, or on an attachment with an address.

SIGNATURE:

SANATURE AND TYPED OR PRINTED HAVE OF BIGNING OFFICER OR DIRECTOR

03/3//97

(205) 551-0690 Dayline Phone #

**FILED** 

Apr 03 1997 8:00am

Secretary of State