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**

FILED Jan 24 1997 8:00am Secretary of State

DOCUMENT #	P9600002589

MANAL OLIVER & ASSOCIATES, INC.

Principal Place of Business

1424 OCEAN DRIVE #303

Mailing Address

1424 OCEAN DRIVE #303

MIAMI BEACH F	FL 33139 MIAMI BEACH FL 33139-4180				
				3. Date Incorporated or Qualified 03/18/1996	3a. Date of Last Report
2. Principal Pl	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 5121		AVE 26 SAME		65-0646066	Not Applicable
Suite, Apt. :	#, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State 23 MLA	MI BEACH F	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 33	140 35 DATE	Zip 29	Country 30	This corporation has liability for I Florida Statutes	ntangible tax under s. 199.032,
24 001	g. Name and Address of	Current Registered Agent	[00]	10. Name and Address of New Re-	gistered Agent
OLIV	ER, MANAL		81 Name		
	FOCEAN DRIVE #303 WEBEACH FL 83139	3121 SHERIDA MIAMT BEACH FL 33	140 83 Street A	ddress (P.O. Box Number is Not Acceptab	95 Zin Code
•					FL S E P P P P P P P P P
 office or reagent. Fall 	edistered agent, or both, in the	307.0502 and 507.1508, Florida Statulice State of Florida Such change was ice obligations of Section 607.0505, Fl	authorized by the corpo	corporation submits this statement for the poration's board of directors. I hereby accept	of the appointment as registered
SIGNATURE	Signature, typed or printed name of regu	stered agent and title Lapplicable. (NO)	TE Registered Agent signature h	equired when reinstating)	DATE
12.	OFFICE	RS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12
TiTLE		DELETE	1.1 TITLE	PRESIDENT	CERS AND DIRECTORS IN 12 Change Addition OVENUE Change Addition
NAME			1.2 NAME	MANAL OLLVEK,	1,00,14,0
STREET ADORESS			1.3 STREET ADDRESS	3121 SHERIDAN A	VENUE,
CITY-ST-ZIP			1.4 CITY-ST-ZIP	MIAMI BEACH FL	- 33 <i>14</i> 0
TITLE		☐ DELETE	2 1 TITLE		Change Addition
NAME			2.2 NAME		·
STREET ADDRESS			2.3 STREET ADDRESS		
CITY-ST-ZIP			2.4 CITY-ST-ZIP		
TITLE		DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY-ST-ZIP			3.4. CITY-ST-ZIP		
TITLE		DELETE	41 TITLE		Change Addition
NAME			4. 2 NAME	•	
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME		 -	5.2 NAME	40000206	7784
STREET ADDRESS			5.3 STREET ADDRESS	-01/24/97010/ ***165.00	27032
CITY - ST - ZIP			5.4 CITY - ST - ZIP	***16S.00	
TITLE		DELETE	6.1 TITLE		Change
NAME			6.2 NAME		
}			63 STREET ADDRESS	THE TOTAL STATE OF THE PARTY OF	T(-1061, 1-50
STREET ADDRESS				**************************************	· · · · · · · · · · · · · · · · · · ·
CITY-ST-74P	by excite that the information	cumplied with this filing does not avail	64 CITY-SY-ZIP	ated in Section 119 (17/3)(i) Florida Statute	is 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 changed, or on agrattachment with an address. MANAL OLIVER 1-13-96 534-2197

SIGNATURE: