FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mgrtham 👵

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000026901 (4)

ASSOCIATION OF YOUNG INVESTORS TOWARD IMPROVEMENT. INC.

1712 ATHERTON AVENUE 1712 ATHERTON AVENUE **ELMONT NY 11003** ELMONT NY 11003-1832 Date Incorporated or Qualified 03/27/1996 3a. Date of Last Report 4. FEI Number 2. Principal Place of Business 2a. Mailing Address Applied For 58 22 Not Applicable 26 Sulte, Apt. #, etc. Suite, Apt. #, etc. **\$8.75** Additional Certificate of Status Desired Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 Trust Fund Contribution 28 Added to Fees Zip Country Zip Country This corporation has liability for intengible tax under s. 199.032, Yes No 24 Florida Statutes 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent VICTOR, BERNARD **B**1 Name 14900 S.W. 82ND TERRACE 82 Street Address (P.O. Box Number is Not Acceptable) MIAMI FL 33193 83 Zip Code 11. Pursuant to the provisions ("Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signature, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. (96/6) DELETE TITLE 1.1 TITLE ___ Change ___ Addition PAULEUS, RONY NAME 1.2 NAME % 1712 ATHERTON AVENUE STREET ADDRESS 1.3 STREET ADDRESS **ELMONT NY 11003** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE Change Addition TITLE 21 THLE SURENA, MARK NAME 22 NAME %-1712 ATHERTON AVENUE STREET ADDRESS 2.3 STREET ADDRESS **ELMONT NY 11003** CITY-ST-71P 2. 4 CITY - \$1 - ZIP DELETE Change Addition TITLE 3.1 TITLE THEUS, JACQUES NAME 3.2 NAME % 1712 ATHERTON AVENUE STREET ADDRESS 3.3 STREET AODRESS **ELMONT NY 11003** CITY-ST-ZIP 3 4. CITY-ST-ZIP __ DELETE TITLE Change Addition 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY - ST- ZIP

5.1 TITLE

5.2 NAME

617005

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS 6.4 CITY - ST - ZIP

5 4 CITY-ST-ZIP

14. 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 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 exceed 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

TITLE

TITI F

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

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DELETE

DELETE

4/25/97

(5/1) 32/2-28/14

Change

Change

Addition

Addition

FILED

Jun 16 1997 8:00am

Secretary of State