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PROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

FILED May 02 1997 8:00am Secretary of State

	1997 DIVISION OF CORPORATIONS											
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Principal Place of Business Mailing Address										11(1) 4 (95) 4 (1)(5 (1 4) 1	1191 1991	
9532 S.W. 1ST COURT CORAL SPRINGS FL 33071 JAEW CORAL SPRINGS FL 33071-7386												
1 HORES			(3. Date Incorporated or Qualified 3a. Date of Last Rep 04/17/1996			aport	
2. Principal P	lace of Busine	TFORD DA	Λ ├── <i>¬ / /</i>	ng Address	CATFO	on i	0	4. FEI Number	10		plied For	1
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22			27					6. Certificate of Status Desired	L	Fee Re		
City & State	KLAN	D. FL	28 PA	B State PKLAN	D. F	٤,		 Election Campaign Financing Trust Fund Contribution 	' п	\$5.00 Added to		
Z _I O _		Country	Zip	2067		POWAT	21	8. This corporation has liability	or intang	ible tax under s.		1
₂₄ 3306		5 DROWTR		JU 4 /	30 12	UNITE	CH	Florida Statutes 10, Name and Address of New	Yes			l
AOT			ir ueðisteten	Agent	81	Name		10, Maine and Address of New	Hadiste	eo Agent		1
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	KLAND FL 3			1_1			10165	ss (r.o. box Number is Not Accep	laule)			
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٠					84	City				85 Zip C	ode	1
11, Pursuant	to the provisio	ns of Sections 607.050	2 and 607.15	08, Florida Statu	tes, the above	e-named co	orpor	ration submits this statement for th	0.00000	o of phonoine its	; s registered	┨
office or r agent Pa	registered age ım famılıar witr	nt, or both, in the State 1. and accept the obliga	of Florida. Su ations of, Sect	ch change was ion 607,0505, Fi	authorized by lorida Statoe	the corpo	ration	n's board of directors. I hereby ac	cept the	appointment as	registered	
SIGNATURE	OHER	YL ASTE	en	Cher	Olls	lein	_	4/11/9	7			l
10	Stignature, typed of	printed han a of registered age OFFICERS AND			C Hegistered Age	ent signature re	quired	when reinstating) ADDITIONS/CHANGES TO OF	DA		S IN 12	ا
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	by certify that	the information supplied	d with this film	g does not qual			ted in	n Section 119.07(3)(i), Florida States	utes. I fu	rther certify that t	the	1

14. I do hereby certify that the information supplied with this fling does not qualify for the exemption stated in Section 119.07(3)(), 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 fursitee 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF

L ASTERN

4/11/97 954-346-6414

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