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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT # P9600038081 (1)

STEVEN SHEINFELD, P.A.

Principal Place of Business SOUTH ANDREWS AVENUE SLITE JOHN

SIGNATURE:

Mailing Address SOUTH ANDREWS AVENUE, SUITE 1929

FILED Mar 11 1997 8:00am Secretary of State

J7 (95A)412A2E



FT. LAUDERDA	ALE FL 33301 ()	FT. LAUDERDALE FL 33301-2	845		
				3. Date Incorporated or Qualified 05/01/1996	3a. Date of Last Report
	lace of Business	2a. Mailing Address	`\ \	4. FEI Number	Applied For
21] 52\ :	So. Andrews Aye		cheus Ave	65-06094	Not Applicable
Surte, Apt. 22	#, etc.	Suite, Apt. #, etc.	- \	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State 23 11 1	axbook, FL	City & State	obb, FE	6. Election Campaign Financing , Trust Fund Contribution	\$5.00 May Be Added to Fees
24 332	25) 25	29 333201 30	Bougo	8. This corporation has liability for Florida Statutes	Yes No
	9. Name and Address of Current I	Registered Agent		10. Name and Address of New Rec	jistered Agent
	einfeld, steven		81 None	exten sev	en l
	"Söuth Andrews Avenue, Sul" Lauderdale FL 33301	TE- 102N - ()	82 Street Address	ess (P.O. Boo Number & Not Acceptab	Ne, Ste. 11
			84 City	Landonale	85
11. Pursuant to the provisions of 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	Signative typical or printed name of registered agent.	and title If applicable. (NOTE: R	egistered Agont signature require	ed when reinstating)	DATE
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12
THLE		DELETE	1.1 TITLE	9	Change Addition
NAME			1.2 NAME	even Shemfer	المطحا
STREET ADDRESS			1.3 STREET ADDRESS	in so Andreus	Ave 3011
CITY-SI-7IP			1.4 CITY-ST-ZIP	a codoco le	3337
THUE		DELETE	2 1 TITLE	4 DOCE CERCY	☐ Change ☐ Addition
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NAME			6.2 NAME		
STREET ADORESS			6.3 STREET ADDRESS		
C(1) - S1 - Z(P		200 st 12 f (0) = 4	6.4 CITY - ST - ZIP	11. 6. V 40 NY/AVA POTEN	
informatio	on indicated on this annual report or sur	oplemental annual report is true	and accurate and that	d in Section 119.07(3)(i), Florida Statuter my signature shall have the same lega it as required by Chapter 607, Florida S	l effect as if made under oath; that