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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000043115 (0)

CAMBUHY CORPORATION

FILED Jan 23 1997 8:00am Secretary of State

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Principal Plac					II		AND NAMED AND PARTY OF		
	ce of Business	Mailing Address			'"			~~	
112 S HIBISCUS DR 112 S HIBISCUS DR MIAMI BEACH FL 33139-5130									
						e Incorporated or Qualified 21/1996	3a. Date of	Last Re	eport
2. Principal F	Place of Business	2a. Mailing Address				Number	<u> </u>	U Api	plied For
<u> </u>		26						Not	Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc. 27					5. Cer	rtificate of Status Desired	1 1	3.75 A Fee Re	dditional quired
City & State City & State				1	ction Campaign Financing st Fund Contribution	· ·	5.00 Added to		
Zip	Country	Zip	Countr	У	8. Thi	s corporation has liability for	_ •		199.032,
3343	25	29	30				Yes No		
		ent Registered Agent		1	10. Na	me and Address of New Re	gistered Agen	t	
	igen, roland		81	Name	·				
	S HIBISCUS DR		82	Street	Address (P.O.	Box Number is Not Acceptat	le)		
MIA	MI BEACH FL 33140 - 33139		83	1					
	33.71		84	City			FL 85	Zip C	Code
• B	to the provisions of Sections 607.05	00 1 007 4500 Florida Otto						بردا	34_
SIGNATURE		ND DIRECTORS	E: Registered Ap	ent signalure	required when reins	taling) ITIONS/CHANGES TO OFFIC			
ITLE	D	☐ DELETE	1.1 TITLE					Change	Addition
AME	LANGEN, ROLAND		1.2 NAME						
TREET ADDRESS	112 S HIBISCUS DR								
			1.3 STREE	T ADDRESS		.			
	MIAMI BEACH FL-33140		1.4 CiTY		חופתו	Beach, Fl. 7	33139		
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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 suppremental 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

Date

Jaylime Phone #