## 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 # P9600050867 (6)

SFRENATA, INC.

Principal Place of Busine 1335 HOLLTWOOD BLVD HOLLTWOOD PL 33019

**SIGNATURE:** 

Mailing Address

1335 HOLLYWOOD BLVD HOLLYWOOD FL 33019-1517

## FILED Apr 30 1997 8:00am Secretary of State

5-4313



				Date of Last Report	
			<b>06/14/1996</b> 4. FEI Number		
2. Principal Place of Business 21 120 South 20 Aug	2a. Mailing Address 26		65-0679251	Applied For Not Applicable	
Suite Apt if etc. 22 Hollywood	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City 8 State 4	City & State		6. Election Campaign Financing	\$5.00 May Be	
23 Florida	28		Trust Fund Contribution	Added to Fees	
Zip Country	Zip	Country	8. This corporation has liability for intangit		
24 33020 25 USA	29	30	Florida Statutes Yes No		
Name and Address of Current Registered Agent			10, Name and Address of New Registered Agent		
HODGES, PERRY W JR		81 Name			
644 SE 4 AVE		82 Street Add	82 Street Address (P.O. Box Number is Not Acceptable)		
FT LAUDERDALE FL 33301		Oli Oci rido			
		63			
		04 05		. 85 Zip Code	
		64 City	F	L 85 Zip Code	
<ol> <li>Pursuant to the provisions of Sections 60 office or registered agent, or both, in the agent. I am tamiliar with, and accept the</li> </ol>	State of Florida. Such change was a	authorized by the corporat	poration submits this statement for the purpose tion's board of directors. I hereby accept the a	of changing its registered ppointment as registered	
SIGNATURE					
Signature, typical or printed name of register		E: Registered Agent signature requi	red when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS A		
	S AND DIRECTORS  DELETE	13.		Change Addition	
TITLE	[_] DEFEIE	1.1 311128	PRESIDENT SERALDINE SHELLY		
NAME		1 2 NAME	GERALOINE SHELLY	de MARCO	
STREET ADORESS	,	1.3 STHEET ADDRESS	1335 HOLLY WOOD	BLVO	
CHY-ST-ZIF	<u> </u>	1.4 CITY-ST-ZIP	HOLLYWOOD DL 39	OLP.	
THLE .	€ DELETE	2 1 TITLE		Change	
NAME		2 2 NAME			
STREET ADDRESS		2 3 STREET ADDRESS			
CHY-SI-ZIC		2.4 CITY-ST-ZIP			
THILE	☐ DELETE	3.1 TITLE	·	☐ Change ☐ Addition	
NAME		3.2 NAME			
STREET ADDRESS		3.3 STREET ADDRESS			
CIEY - S1 - ZIP		3.4. CITY-ST-ZIP			
DitE	DELÉTE	4.1 TITLE		☐ Change ☐ Addition	
HANG		4. 2 NAME			
STREET ADDRESS		4.3 STREET ADDRESS			
CHY-\$1-70°		4.4 CITY-ST-ZIP	•		
TITLE	DELETE	5.1 TITLE		Change Addition	
NAME		5.2 NAME			
STREET ADDRESS		5.3 STREET ADDRESS			
		5.4 CITY - ST - ZIP			
COLVEST - 716 THE	DELETE	6.1 TITLE		Change Addition	
	bred Dece 15	6.2 NAME		<del></del>	
NAM!					
STREET ADDRESS		6.3 STREET ADDRESS			
C-IY-SI ZIP	innlied with the films dose not avail	fy for the exemption state	d in Section 119.07(3)(i), Florida Statutes. I fur	her certify that the	
<ul> <li>Information indicated on this annual report</li> </ul>	rt or supptemental annual report is t ion or the receiver or trustee empoy	true and accurate and that vered to execute this repo	at my signature shall have the same legal बगरूट ort as required by Chapter 607, Florida Statute	t as it made under oath; that i	