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

PROFIT
CORPORATION
ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000050958 (3)

15 ROAD BRICKELL ASSOCIATES, INC.

Principal Place of Business

150 WEST FLACER STREET STE 2701~

Mailing Address

450 WEST FLAGLER STREET STE 2701

FILED Mar 26 1997 8:00am Secretary of State



MIAMI FL 93130		MIAMI FL 23120-1568						
				3. Date Incorporated or Qualified 06/12/1996	3a. Date of	ate of Last Report		
2. Principal Plac		2a. Mailing Address		- nd	4. FFI Number		App	lied For
21 100 5	outheast 2" S	5t 26 100 South	rast o	2ºº St.	65-0347643			Applicable
Suite, Apr. #, etc Suite, Apr. #, etc 27 37+h Floor 27 37+h Floor			oor		5. Certificate of Status Desired		3.75 Ac Fee Rec	
City & State	mi, Florida	City & State	Flor	ıda	Election Campaign Financing Trust Fund Contribution		5.00 k Added to	
Zip	Country	Zip _	Country	,	8. This corporation has liability for it	. • —		199.032,
24 3313	25	29 33131 30	0		110.100 00.0100	Yes No		
	9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent				
BEFELER, MONIQUE T				81 Name				
6395	MONTGOMERY DRIVE		82	Street Addre	ess (P.O. Box Number is Not Acceptab	le)		
. MIAMI	I FL 33156							
			83					
			84	City		FL 85	Zip C	ode
11. Pursuant lo	the provisions of Sections 607.05	02 and 607.1508, Florida Statutes,	the abov	i e-named corpi	oration submits this statement for the p	urpose of char	nging its	registered
other or rece	auctored amount or both, in the Stat	le of Florida. Such change was aut gations of, Section 607.0505, Florid	horized b	√ the corporatii	on's board of directors. I hereby accep	t the appointn	ient as r	agistered
SIGNATURE	greated agreed to protect name of roginario dis-			ent signature require		DAYE		
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC		ECTORS Change	Addition
	D	☐ DELETE	1.1 TITLE			۱ (سا	allan y e	L. Addition
	BEFELER, MONIQUE T		1.2 NAME					
	6395 MONTGOMERY DRIVE		1.3 STREE	I ADDRESS				
C(1) - S1 - 7IP	MIAMI FL 33156		1.4 CITY - 3	ST - ZIP			Thanks	Addition
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V7A-			2.2 NAME					
SHREET ADDRESS:			2.3 STREE	· •				
C(h S) Z(h		E DELET	2. 4 CITY -	ST-ZIP			Change	Addition
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NAME			4 2 NAME					
S1861 ADDRESS				T ADDRESS				
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To Be F		L Detect	5 1 TITLE				Change	Tuonion
HAMI			5 2 NAME	T 1000000				
STREET A TIDRESS				T ADDRESS				
017V - \$1 - 760		DELETE	5.4 CITY-	ST-ZIP			Change	Addition
III.F		ר"ו הנובוב	6.1 TITLE			لسا	Ananão	roundit
hAMi			6.2 NAME					
S REFT 400EF55				T AODRESS				
CHY+SI+ZIP			6.4 CITY-					

4. To increasy certify that the information supplied with his hilling does not qualify for the exhibition 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 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.

15 ROAD SPICKELL ASSIGNATES, INC.

SIGNATURE:

Marily DED ON PRINTED WANTED

an appendice

3/5/97

305-379-830