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**PROFIT CORPORATION** ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 02 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # P96000053754 (3)

CL OOD	, INC.							
Principal Plac	e of Business		Mailing Address			a radicabli die iniin ditit ddini dhiii dhiii	A DIA I BURA MAN ANDAL A	
908 71 STREET Miami Beach Fl 33141			908 71 STREET MIAMI BEACH FL 33141-2916					
						3. Date Incorporated or Qualified 06/24/1996	Sa. Date of Last	Report
2. Principal Place of Business  Suite, Apt. #, etc.			2e. Mailing Address 26 Suite, Apt. #, etc. 27			4. FEI Number   Applied F		Applied For Not Applicable
						5. Certificate of Status Desired S8.75 Additional Fee Required		
City & State	e		City & State	***************************************		Election Campaign Financing     Trust Fund Contribution		O May Be d to Fees
Zφ	Cou	ntry	<b>Z</b> (p	<b>├</b> ─¬	untry	8. This corporation has liability for in	ntangible tax unde	
<u> </u>	25		29	30			Yes No	
	9, Name and Ad	dress of Current	Registered Agent		<u> </u>	10. Name and Address of New Rec	gistered Agent	
STE	INBERG, PAUL B				81 Name	'		
767 ARTHUR GODFREY ROAD MIAMI BEACH FL 33140					82 Street Add	rss (P.O. Box Number is Not Acceptable)		
(*************************************		.•			83			
					84 City		FL 85 Zi	p Code
				0	1 1			
	registered agent, or b im familiar with, and a	ooth, in the State accept the obliga	of Florida. Such chang tions of, Section 607.0	je was authoriz 505, Florida St	ed by the corpora: atutes.	poration submits this statement for the pation's board of directors. I hereby accep	a the appearance	
SIGNATURE	registered agent, or b im familiar with, and a Signatine, spect or protect or		i and tile if applicable.		ed Agent signature requi		DATE	
IGNATURE		name of registered ager	i and tile if applicable.	(NOTE: Register	ed Agent signature requi	red when reinstating)	DATE	ORS IN 12
SIGNATURE 12. IILE	PSD OMORES, ERIC	name of registered ager	if and title if applicable.  DIRECTORS	(NOTE: Register	ed Agent signature requi	red when reinstating)	DATE CERS AND DIRECT	ORS IN 12
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