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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED Mar 26 1997 8:00am Secretary of State

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rincipal Plac	e of Business	Mailing Addres	38		E IODIIDA IIO FORE BILLI BOLI DOLLI GO	ISE MAJAN MITAN MISSI BINAAN II	III DIII IBBI
546 NW 97TH DR ARKLAND FL 33076		6546 NW 97TH PARKLAND FL					
				•	3. Date Incorporated or Qualified	3a. Date of Last	Report
			1		06/26/1996		
- Principal P I	hace of Business	2a. Mailing Add	dress		4. FEI Number x 65 - 067877		Applied For
Suite Apt	# ote	Suite, Apt.	# elc		200001011	60 75	Not Applicable Additional
Gaille 74th	W. 600.	27	,, 010.	•	5. Certificate of Status Desired		Required
City & Stat	7C	City & State	3		6. Election Campaign Financing	\$5.00	May Be
		28			Trust Fund Contribution	Added	to Fees
Zip]	Country	Z ₁ p	h	Country '	8. This corporation has liability for		s. 199.032,
	25 9. Name and Address of Cu	urrent Registered Agent	30		Florida Statutes 10. Name and Address of New Re	Yes No	
		ullelli Hegistered Ageni		81 Name	IV. Name and Address of New A	bylateleti Agent	
	UAID, VICTOR						
	16 NW 97TH DR			82 Street Add	dress (P.O. Box Number is Not Accepta	ble)	
PAF	RKLAND FL 33076			63			***************************************
						1	
				84 City		FL 85 Zip	o Code
					rporation submits this statement for the ation's board of directors. I hereby acce		its registered is registored
GNATURE 2.	Superine typed or printed name of eights OFFICERS	red agent and the if applicable S AND DIRECTORS	(NOTE: Regis	stered Agent signature requ		DATE CERS AND DIRECTO	DRS IN 12
IGNATURE 2.	Signature typed or printed name of top used OFF ICERS	red agent and the if applicable S AND DIRECTORS	(NOTE: Regis	stered Agent signature requ 13.	uired when reinstat ng)	DATE	DRS IN 12
GNATURE L M	Signature typed to protect name of top used OFF ICERS D SOUAID, VICTOR	red agent and the if applicable S AND DIRECTORS	INOTE: Regis DELETE 1	stered Agent signature requ	uired when reinstat ng)	DATE CERS AND DIRECTO	DRS IN 12
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Information 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 Larn 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 in changed or on an all officer.

VICTOR Sonaid