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

CORPORATION



PROFIT FLORIDA DEPARTMENT OF STATE

FILED May 12 1997 8:00am

ANNUAL REPORT se			Secretar	Secretary of State ON OF CORPORATIONS			Secretary of State			
DOCUN f. Corporation	MENT # P960						English was a second of the se	191 4/10 / 1111 1	ALU I b ur a ra	1 6 01 (86)
Principal Place of Business 18520 NW 67TH AVENUE SUITE 161 MIAMI FL 33015		Mailing Address 18520 NW 67TH AVENUE SUITE 161 MIAMI FL 33015-3304								
							Date Incorporated or Qualified 07/18/1996	3a . Dai	e of Last Re	eport
21	ace of Business	2a, Mailing 26				4	FEI Number	·	No	plied For t Applicable
Suite, Apt (#, etc.	Suite, A	pt. #, etc.			6	Certificate of Status Desired		\$8.75 A Fee Re	
City & State 23	,	City & S 28	state			•	i. Election Campaign Financing Trust Fund Contribution		\$5.00 Added t	
7(p) 24	Country 25	Zip 29		Celunt 30	ry			Yes [] No	. 199.032,
Wii i	 Name and Address of Control LISA 	urrent Registered Ag	ent	8	1 Name). Name and Address of New F	legistered A	gent	
18520 NW 67TH AVENUE SUITE 161 MIAMI FL 33015					2 Street	1 Address	(P.O. Box Number is Not Accept	able)		
				•	4 City			FL	85 Zip (Code
11. Pursuant t office or re agent. Far	o the provisions of Sections 607 eg stered agent or both, in the m familiar with, and accept the o	7.0502 and 607.1508, State of Florida. Such obligations of, Section	Florida Statute change was a 607.0505, Flo	es, the about authoriced orida Scitut	ve-named by the cores.	d corporation's	ion submits this statement for the board of directors. I hereby acc	purpose of ept the appo	changing it pintment as	s registered registered
	Sharaturi, Typed or protect can ellot register). (NOTE	Registered A	gent signatur	re required wh	en reinstaling)	DATE	Diprovon	2011110
12.	DEFICER	S AND DIRECTORS	DELETE			Pre	ADDITIONS/CHANGES TO OFF	ICERS AND	Change	Addition
NAME STREET ADORESS	WILLIAMSON, LISA 17220 NW 56TH AVENUE			1 JAM STRE	E Et address	Dia	BUD W. Byth	chood Spood		1
CITY - S.E - ZIP	MIAMI FL 33055		DELETE	CITY	- \$1 - ZiP	1119	mi, FL 3	305	Change	Addition
NAM!		·	C_ OLCUIP	VAM			•		<u></u>	
STREET ADDRESS ONLY ST-26					ET ADDRESS (~\$T-ZIP	3				
1111			DELETE	III					Change	Addition
NAMI			•	VAM						
STREET ADDRESS City - StZP				166	ET ADDRESS /-St-Zip	,				
TITLE			DELETE	iTL					Change	Addition
NAME:				NAI						
CITY ST-ZIP					et adoress -st-zip	·				
TOTAL TOTAL			DELETE	utr		1			Change	Addition
NAME				VAN						
STREET AFORESS					EET ADORESS	5				
111.F			DELETE	COTY	-ST-ZIP E				Change	Addition
NAME:				JAN					-	
STREET ACCORESS				STA	eet address	s				
007-81-76 14. 1 do hereb	iy certify that the information su	onlind with this files	nos not qualif		*ST-ZIP	Stated in 1	Section 119.07(3)(i), Florida Statu	ites I further	certify that	the
information	n indicated on this annual repoi ficer or director of the corporati a Block 12 or Block 13 if prang	t or supplemental and	nual report is tr	ru ac	unite an	nd that my s report as	signature shall have the same le required by Chapter 607, Florida	gal effect as Statutes; a	if made un nd that my	nder oath; that name