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

**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 # P96000061477 (1)

NAME	Principal Place of Bu 8231 NW 66TH STREE MIAMI FL 33166		Mading Address  8231 NW 65TH STREET MIAM! FL 33166-2721		<u> </u>			
2. Pincepair Finance of Business   2. Mailing Address   3. FET Number   Sharper   Sh							3a. Date of Last R	eport
Solito, Apt #, effc.    Suito, Apt #, effc.   Part   Part	1	Business	<del></del>			4. FEI Number		
City & State							SR 75 /	
Trust Floor Country							Fee Re	
Top   County   Zip   Solid			}			1		
SANCHEZ, CHARLES J 6827 TM TAM TRAIL TALLAHASSEE FL 32308  11. Pursuant to the processor of population of the superior data of the supe		Country		Cou	intry		angible tax under s	
SANCHEZ, CHARLES J 6627 TIM TAMI TRAIL TALLAHASSEE FL 32308  682 Strop Address (P. Boy Number Light Acopptable)  683  684 CIVIL A MI  FL	4			30	· · · · · · · · · · · · · · · · · · ·			
TALLAHASSEE FI. 32306    A			urrent Hegistered Agent		81 Name	10. Marrie and Address of New Years	REIGO AUGIII	
TALLAHASSEE FL 32308    B4   CW   A MI   FL   55   ZIp Code					82 Street Addr	YE I VICTOCH  ress (PΩ Box Number is Not Acceptable	)	
11. Fursional to the proposed I Sections (07 050) and 602 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent and adeasy the proposed of the Statutes of English was authorized by the corporation's board of directors. I hereby accept the eppointment as registered agent and adeasy the proposed of the Statutes. I hereby accept the eppointment as registered agent and adeasy the proposed of the Statutes. I hereby accept the eppointment as registered agent and adeasy the statutes of the Statutes. I hereby accept the eppointment as registered agent and accept the proposed accept the eppointment as registered agent and accept the proposed accept the eppointment as registered agent and accept the proposed accept the eppointment as registered agent and accept the proposed accept the eppointment as registered agent and accept the eppointment as registered as the expectation of the expension and accept the eppointment as registered and accept the eppointment as registered agent and accept the eppointment as registered and accept the eppointment and accept the eppointment and accept the expension accept the eppointment accept accept the eppointment accept and accept the eppointment accept accep						1 N.W. 66 CL . 67		
11. Furshand to the proposed A Sections 907 (053) and 607 1508. Florida Statutes, the above-handle or registered agent on the purpose of changing lis registered office or registered agent on the State of Burde. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent 1 m by state with made accept the suppointment as registered agent 1 m by state with made accept the suppointment as registered agent 1 m by state with made accept the suppointment as registered agent 1 m by state with made accept the suppointment as registered agent 1 m by state with made accept the suppointment as registered agent 1 m by state with made accept the suppointment as registered agent 1 m by state with made accept the suppointment as registered as a state of the suppointment as registered agent 1 m by state with made accept the suppointment as registered as a state of the suppointment as registered as a state of the suppointment as registered as a state of the suppointment as registered as a registered as a state of the suppointment as a registered with as a state of the suppointment and as a state of the suppointment as positions and the suppointment as positions and the suppointment with the address on except the suppointment as positions and the suppointment with the address on except the suppointment and principles and their my supposition by Chapter 607, Prointed Statutes. I further certify that the uniformation supports of with a registe					63			
11. Purposari to the recovery of Sections 607 (500) and 60			$\frown$		84 City A	·Mi	FI 85 Zip (	Code
INCE	SIGNATURE Signature	typed on annoted name of registe	red agent and title if applicable (h	vOTE: Registere		ad when reinstaling)	1/24/97 DATE	
12   NAME     1.3   STREET ADDRESS   1.4   GTV-ST-JP		OFFICER			715	ADDITIONS/CHANGES TO OFFICE		
SIRRET ADDRESS CHY-ST-ZIP TITLE DELETE 21 TITLE DELETE 31 TITLE DELETE 31 TITLE DELETE 31 TITLE DELETE 41 TITLE DELETE 51 TITL		ES GENT OIL		- 1	L L		L_J Ontinge	Addition
DELETE 21 VITLE Change Additionable Change Additionable 22 MAME 22 MAME 23 SIREET ADRESS COVY ST 2P DELETE 31 VITLE 31 VITLE 31 VITLE 32 MAME		L31 NW. 666	et	- 1				
STREET ADDRESS   22 MAME   23 STREET ADDRESS   24 COTY - ST - ZIP		INMI, FLI	33166		· · · · · · · · · · · · · · · · · · ·			Carrie
2 3 STREET ADDRESS CITY ST ZIP  DELETE 3.1 TITLE 3.2 MAME 3.2 MAME 3.3 STREET ADDRESS CITY ST ZIP  DELETE 3.1 TITLE 3.3 STREET ADDRESS CITY ST ZIP TITLE 4.1 TITLE 4.2 NAME 4.2 NAME 4.2 NAME 4.2 NAME 4.3 STREET ADDRESS CITY ST ZIP TITLE 5.1 TITLE 6.1 TITLE 6.1 TITLE 6.2 MAME 5.3 STREET ADDRESS CITY ST ZIP TITLE 6.3 NAME 5.3 STREET ADDRESS CITY ST ZIP TITLE 6.3 NAME 5.3 STREET ADDRESS CITY ST ZIP TITLE 6.3 NAME 5.3 STREET ADDRESS CITY ST ZIP TITLE 6.3 NAME 5.3 STREET ADDRESS CITY ST ZIP TITLE 6.3 STREET ADDRESS CITY ST ZIP TITLE 6.4 CITY ST ZIP TITLE 6.5 STREET ADDRESS CITY ST ZIP TITLE 6.5 STREET	Į		L DELETE	1			Change	Addition
Color   St. 78					l l	•		
NAME SIRET ADDRESS CITY_ST-70  THE DELETE 41 TITLE Change Additional Control of the corporation or be receiver of trustee employered as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of Name of Control on the same legal effect as if made under or appears in Block 12 or Block 13 of Name of Control on the receiver of trustee employered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 13 of Name of Control and Comment with a address.	Į.			2.40	CITY - ST- ZIP			
STREET ADDRESS CITY_ST-ZIP TITLE DELETE 4.1 TITLE Address CITY_ST-ZIP TITLE DELETE 4.1 TITLE Change Address CITY_ST-ZIP TITLE DELETE 4.1 TITLE Change Address CITY_ST-ZIP TITLE DELETE 5.1 TITLE STREET ADDRESS CITY_ST-ZIP TITLE DELETE 5.1 TITLE STREET ADDRESS CITY_ST-ZIP TITLE DELETE 5.1 TITLE Change Address CITY_ST-ZIP TITLE DELETE 6.1 TITLE DELETE CHANGE Address STREET ADDRESS 6.4 CITY_ST-ZIP TITLE DELETE CHANGE Address Addres	1		[_] DELETE		1		☐ Change	Addition
CITY ST-2IP  INTE DELETE 4.1 TITLE 4.2 NAME 4.2 NAME 4.2 NAME 4.3 STREET ADDRESS CITY-ST-2IP DELETE 5.1 TITLE Change Additional STREET ADDRESS CITY-ST-2IP THE DELETE 5.1 TITLE 5.2 NAME 5.2 NAME 5.2 NAME 5.2 NAME 5.3 STREET ADDRESS CITY-ST-2IP THE DELETE 6.1 TITLE 6.1 TITLE 6.1 TITLE 6.1 TITLE 6.2 NAME 5.2 NAME 5.2 NAME 5.3 NAME 5.4 NAME 5.5 NAME 5.6 NAME 5.6 NAME 5.6 NAME 5.6 NAME 5.7 NAME 5.8 NAME 5.8 NAME 5.9 NA				1				
A 2 NAME  4.2 NAME  4.3 STREET ADDRESS  COTY-ST-ZIP  4.4 CITY-ST-ZIP  DELETE  5.1 TITLE  NAME  5.2 NAME  5.3 STREET ADDRESS  COTY-ST-ZIP  DELETE  5.4 CITY-ST-ZIP  DELETE  6.1 TITLE  Change Additionable  Change Additionable  Change Additionable  Additionable  SIRELL ADDRESS  COTY-ST-ZIP  DELETE  6.1 TITLE  Change Additionable  Change Additionable  Additionable  Change Additionable  Additionable  Change Additionable  Additionable  Change Additionab								
STREET ADDRESS CHY-ST-ZIP CHY-ST-ZIP CHAME STREET ADDRESS CHY-ST-ZIP 14. If do hereby certify that the information supprised with this filling does not dealify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supprimental annual report or supprimental annual report in true and accurate and that my signature shall have the same legal effect as if made under oath; the appears in Block 12 or Block 13 of placed and on an attackment with a address.			DELETE		4		Change	Addition
CHY-SI-ZIP    A 4 CITY-SI-ZIP	l l			1	-	•		
TITLE DELETE 5.1 TITLE								
STREET ADDRESS  DELETE  DELETE  61 TITLE  DELETE  6.3 STREET ADDRESS  6.4 CITY-ST-ZIP  14. If do hereby certify that the information supplied with this filling does not doalify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplimental angular report is true and accurate and that my signature shall have the same legal effect as if made under oath; that an an officer or director of the corporation or the receiver of 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 placed at on an attackment with an address.			☐ DELETE		<del></del>		☐ Change	Addition
THE DELETE 61 ITLE 6.1 ITLE 6.2 NAME  SIFELT ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP  14. If do hereby certify that the information supported with this filling does not dealify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental and all report is true and accurate and that my signature shall have the same legal effect as if made under oath; the appears in Block 12 or Block 13 if placed and on an attackment within address.	NAME				Ų			
THE DELETE 61 TITLE    DELETE 61 TITLE   Change   Addition to the control of the					j			
NAME  SIFET ADDRESS  Git SI- 2P  14. If do hereby certify that the information supplied with this filling does not dealify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report it true and accurate and that my signature shall have the same legal effect as if made under oath; the appears in Block 12 or Block 13 if oranged aron an attackment with an address.			DELETE				Change	Addition
14. If do hereby certify that the information supported with this filing dope not dealify for the exemption stated in Section 119.07(3)(i). Florida Statutes, I further certify that the information indicated on this annual report or supplymental annual report i) true and accurate and that my signature shall have the same legal effect as if made under oath; the lam an officer or director of the corporation or the receiver or trustee employered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if placed and on an attackment without address.	İ			6.2 N	AME			
14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplymental angual report it true and accurate and that my signature shall have the same legal effect as if made under eath; that an officer or director of the corporation or the receiver of trustee employeed to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if placed at on an attackment with an address.	STHELT ADDRESS				1			
mformation indicated on this annual report or supplymental angoal report it true and accurate and that my signature shall have the same legal effect as if made under oath; it ham an officer or director of the corporation or the receiver of trustee emplowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if placed and on an attackment without address.	14. I do hereby cert	ify that the information si	upplied with inis filing does not di	alify for the	exemption states	d in Section 119.07(3)(i). Florida Statutes.	I further certify that	the
THE REPORT OF THE PARTY OF THE	information indic Lam an officer o appears in Block	ated on this annual report of director of the corporal k 12 or Block 13 if offact	rt or supplemental annual report tion or the receiver of trustee emp	it true and lowered to (	accurate and that execute this repor	t my signature shall have the same legal of the	effect as if made un	oder oath: that