SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997. AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000068585 (4)

OSHEROW & SCHWARTZ, P.A.

Principal Place of Business

Mailing Address



FILED

97 SEP 12 PM 1: 28

SECRETARY OF STATE TALLAHASSEE, FLORIDA

8512 NW 40TH COURT BOCA RATON FL 33496		6512 NW 40TH COURT BOCA RATON FL 33496		DO NOT WRITE IN THIS SPACE		
					3. Date Incorporated or Qualified 08/15/1996	3a. Date of Last Report
2. Principal Pi	ace of Business	2a. Mailing Address			4. FEI Number 65-069-034Z	Applied For
Sulte, Apt. #, etc.		Suite, Apt. #, etc.			63-069-0042	Not Applicable \$8.75 Additional
Suite, Apt. :	π, Θ (C.	27 Suite, Apr. #, etc.			5. Certificate of Status Desired	Fee Regulred
City & State		City & State	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28			Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Gouri 30	try	This corporation owes or has pai Personal Property Tax due June	I
24	25 9. Name and Address of Curr	29] ent Registered Agent			10. Name and Address of New Registered Agent	
				81 Name		
	12 NW 40TH COURT		82 Street Ad		dress (P.O. Box Number is Not Acceptable)	
	CA RATON FL 33496				900002294099-4 -09/16/9701029016	
			[*	33	-09/16/9	9701029016
			1	34 City	****165	
11 Purcuant t	to the provisions of Sections 607.0	502 and 607.1508. Florida Stat	tutes, the ab	ove-named co	rporation submits this statement for the p	urpose of changing its registered
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.						
SIGNATURE	The same of the same of the same	9				
SIGNATORE	Signaturo typed or printed name of registered			Agent signature req	ulred when reinstating)	DATE
12.	OFFICERS A	AND DIRECTORS DELETE	13.	r	ADDITIONS/CHANGES TO OFFIC	Change Addition
TITLE	OSHEROW, MARK R		1.1 MA			Series Contraction
NAME STREET ADDRESS	6512 NW 40TH COURT		1	EET ADDRESS		
CITY-ST-ZIP	BOCA RATON FL 33496		1.4 CI			
TITLE	D	DELETE	21 111			Change Addition
NAME	SCHWARTZ, KENNETH J		2.2 NAI	AE		
STREET ADDRESS	4699 SW 72ND AVENUE		2.3 STF	EET ADDRESS		
CITY-ST-ZIP	MIAMI FL 33155			Y-ST-ZIP		The same of the sa
TITLE		DELETE	3.1 TITI			Change Addition
NAME			3.2 NAI	ì		
STREET ADQRESS				EET ADDRESS Y-ST-ZIP		
CITY-ST-ZIP TITLE		DELETE	4.1 TIT			Change Addition
NAME			4. 2 NA			
STREET ADDRESS			4.3 STF	EET ADDRESS		
CITY-ST-ZIP			4.4 CIT	Y-ST-ZIP		
TOTLE		DELETE	5.1 TiT	.£		☐ Change ☐ Addition
NAME			5.2 NA			
STREET ADDRESS				IEET ADDRESS		
CITY-ST-ZIP		DELETE		Y-S1-ZIP		Change Addition
TITLE		□ D£LE3£	6.1 TII			C Ondrige C Audillon
NAME OVEREY LODDSON			6.2 NA	ME REET ADDRESS		$\langle \lambda l \rangle$
STREET ADDRESS				Y-ST-ZIP		1/01/
CITY-ST-ZIP	\		■ 0.4 GH	1 - 31 - 71		1 (- 7)(7)

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 cettify hat the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same logal effect as in place 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 12 if charged in on any traction with an address.

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