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

Mailing Address

12503 W OKEECHOBEE RD

HIALEAH GARDENS FL 33018-6005

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000074562 (5)

SIGNATURE: Lawrence J. Barimo

ELILAW CORPORATION

Principal Place of Business

12503 W OKEECHOBEE RD HIALEAH GARDENS FL 33018

Z.	Principal M	ace or ousir	1088	Za. Maii	Za. Walling Audress				- 1	4. FELINALIDAL	/	Applied For	
21				26	26					65-0723260		Not Applicable	
22	Suite, Apt #, etc 2				Suite, Apt. #, etc.					6. Certificate of Status Desired	7	Additional Regulred	
	City & State)		City	City & State					6. Election Campaign Financing	\$5.0	O May Be	
23	2				28				Trust Fund Contribution		d to Fees		
	Zip					Count	7 This corporation (this liability let indulgible tax direct at 155.052,					s. 199.032,	
24 25 29 30							Florida Statutes Yes No						
9. Name and Address of Current Registered Agent									10. Name and Address of New Registered Agent				
THOMAS, FAYES F JR								Name					
16 SW FIRST AVE							82 Street Address (P.O. Box Number is Not Acceptable)						
MIAMI FL 33130													
							83						
						8	4	City		<u> </u>	85 Zij	p Code	
11	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 Signature, typicd or printed house of registered agent and title diapplicable. (NOTE Registered Agent signature required when reinstating) DATE													
12	12. OFFICERS AND DIRECTORS 13.									ADDITIONS/CHANGES TO OFFICERS AF	VD DIRECTO	ORS IN 12	
Tifi	ı.F	PD			DELETE	1.1 TOTLE	:		PD		Change	Addition	
NA	ME I	Barimo,	LAWRENCE J			1.2 NAM	E	ſ	3 <i>0</i> R 1	imo, Lawrence J.			
STA							STREET ADDRESS 8250 N.W. 159 TERRACE						
CIT	Y-ST-ZIP	71P HIALEAH GARDENS FL 33018						- ZIP	Miami, FL. 33016				
THI	LE	STD			DELETE	2.4 TITLE	: "		57D)	Change	Addition	
NA	ME	Barimo,				2.2 NAM	E			imo, ANA M.			
STR	REET ADDRESS		N 99TH PL			23 STRE	ET A	DDRESS	82 5	ONW 159 TERRACE			
CIT	Y-S1-ZIP	-SI-ZIP HIALEAH GARDENS FL 33018					2 4 CITY-ST-ZIP			mi FL. 33016			
TIT	LF				☐ DELETE	31 TITLE					Change	e 🔲 Addition	
NA	ME					3.2 NAM	E						
STF	HEET ADDRESS					3.3 STRE	ET A	DDRESS					
CIT	Y-S1-71F					3.4. CITY	r•\$1	- ZIP		·			
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NA	ME					4. 2 NAM	Æ						
STF	REET ADORESS					4.3 STRE	ET A	DDRESS					
CIT	Y- \$1-21P					4.4 CITY	-ST	- ZIP					
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NA	ME					5.2 NAM	E					,	
STE	REET ADORESS					5.3 STRE	ET A	ODRESS					
CIT	Y-ST-ZIP					5.4 CITY	- \$1	- Z IP					
TiT	ı.E				DELETE	6.1 TITLE	E				Change	e 🔲 Addition	
NAI	M€					6.2 NAM	E	l					
STI	REET ADDRESS					6.3 STRE	ET A	ADDRESS					
						0.4.04794		***					

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 inclicated 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 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 13 if changed, or on an attachment with an address.

FILED Feb 11 1997 8:00am Secretary of State

3a. Date of Last Report



3. Date Incorporated or Qualified

2-6-97

09/05/1996