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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000080425 (7)

7211 CORP.

Mailing Address

FILED Apr 14 1997 8:00am Secretary of State



mindipar made or business				Maining Address								
C/O ADVANCE DEVELOPMENT CORP. 6262 SUNSET DRIVE PH-218 SOUTH MIAMI FL 33143			6262 (C/O ADVANCE DEVELOPMENT CORP. 6262 SUNSET DRIVE PH-218 SOUTH MIAMI FL 33143-4843								
								3. Date Incorporated or 09/27/1996	Qualified	3n. Date	of Last F	Report
2. Principal Place of Business				2a. Mailing Address				4. FEI Number			I IA	pplied For
21	1			26				65-07003	379			ot Applicable
Suite, Apt. #, etc				Suite, Apt. #, etc.							\$8.75	Additional
22			27	7				5. Certificate of Status D	esired		Fee R	equired
City & State				City & State			6. Election Campaign Fir	nancing		\$5.00	May Be	
23								Trust Fund Contribution				
Zip		Country Zip C			Cou	Country 8. This corporation has liability for intangible tax under s. 199.03					199.032,	
24	_,	25 29 30			30			Florida Statutes Yes No				
		e and Address of Cu	rrent Register	ed Agent		271		10. Name and Address of	1 New Re	istered A	gent	
ı	FRIEDMAN, M					81	Name					
l	1401 BRICKE SUITE 530			82	Street Addr	ess (P.O. Box Number is Not	Acceptab	le)				
MIAMI FL 33131				83				· · · · · · · · · · · · · · · · · · ·	,			
ı							A				lan I sa	
						84	City			FL	85 Zip	Code
11. Pur	suant to the prov	isions of Sections 607	0502 and 607.	1508, Florida Statu	ites, the al	bove-r	named corp	poration submits this statemen	nt for the p	urpose of o	hanging i	ts registered
offi	ce or registered a	agent, or both, in the S	tate of Florida.	Such change was	authorize	d by ti	he corporat	ion's board of directors. I her	eby accep	the appo	ntment as	registered
		with, until decopt the o	inganona or, o	DOTON 007:0000; 1	IOIIOG OIG							
SIGNAT	Signature typ	ed or printed name of registers	d agent and title if ap	plicable. (NC	TE: Flegislere	d Agent	signature requir	ed when reinstaling)	***************************************	DATE		
12.		OFFICERS	AND DIRECTO		13.			ADDITIONS/CHANGES	TO OFFIC	ERS AND	DIRECTO	RS IN 12
TITLE	D			☐ DELETE	1.1 Ti	TLE				ı. I	Change	Addition
NAME		JEFFREY J			1.2 NA	AME						
STREET AL	REEL ADDRESS C/O 6262 SUNSET DRIVE PH-			1.3 STF			DDRESS					
C-TY-ST-	ZIP SOUTH	MIAMI FL 33143			1.4 €	TY-ST-	ZIP					
TITLE				DELETE	2.1 TI	TLE					Change	☐ Addition
NAME					2.2 N/	AME						
STREET AT	DORESS				2.3 \$1	ireet al	DDRESS					
CHY-ST.	7(P		·······		2. 4 C	ITY-ST-	ZiP		··			
HILE				[_] DELETE	3.1 10	TLE				Ĺ	Change	Addition
NAME					3.2 NA	AME						
STREET AT	OD4ESS				3.3 \$1	TREET AC	DDRESS					
CITY-ST-	74P					ITY-ST-	- ZIP					
TITLE				☐ DELETE	4.1 Ti	TLE					Change	Addition
NAME	i				4. 2 N							
STHEET AD	DRESS				4.3 ST	TREET AD	DDRESS					
CTY-SI-	71P				4.4 CI	TY-ST-	Z⊮P	· · · · · · · · · · · · · · · · · · ·			_	
TITLE				☐ DELETE	5.1 Ti	TLE				Ī	Change	Addition
NAME					5.2 N/	AME		* **				
STREET AL	ODRESS				5.3 \$1	TREET AL	DDRESS	•				
CITY-ST-	ZIP				5.4 CI	TY-ST-	ZIP	·				
TITEF				☐ DELETE	6.1 TI	TLE			_	τ	Change	Addition
NAME					6.2 NA	AME						
STREET AC	DORESS				6.3 \$1	IREET AD	DDRESS					
City-St-	7(P				6.4 C!	TY-ST-	ZIP					

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 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 attrachment with an address.

SIGNATURE:

NAMEDIA AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/7/97 (305)666-1978