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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT STATE

Sandra B. Mortin

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000085172 (0)

FILED May 09 1997 8:00am Secretary of State

Principal Place of Business 1170 LEE WAGNER BOULEVARD. SUITE 107 FORT LAUDERDALE FL 33315 Mailing Address 1170 LEE WAGNER BOULEVARD. SUITE 107 FORT LAUDERDALE FL 33315			LEVARD. SUITE 107 13315-3561	PD. SUITE 107		
				3. Date Incorporated or Qualified 10/15/1996	3a. Date of Last	Report
. Principal Plac	ce of Business	2a, Mailing Address		4. FEI Number	I A	pplied For
		26		65-0703441		lot Applicable
Suite, Apt. #,	, etc	Suite, Apt. #, etc.		6. Certificate of Status Desired		Additional lequired
City & State		City & State		6. Election Campaign Financing		
		28		Trust Fund Contribution) May Be I to Fees
7 <u> </u>	Country	Zip	Country	8. This corporation has liability for	or intangible tax under	
]	25	29	30	Ftorida Statutes	Yes No	
	9. Name and Address of Curre	ent Registered Agent	81 Name	10. Name and Address of New I	Registered Agent	
	NLAWYER CHARTERED		81 Name			
343 ALMERIA AVENUE			82 Street Add	82 Street Address (P.O. Box Number is Not Acceptable)		
COHA	NL GABLES FL 33134		83			
·						
			84 City		FL 85 Zip	Code
- D	10 2 007 0			maratias a broke this statement for the	purpose of changing	its registered
 Pursuant lo 	i the provisions of Sections 607.05	502 and 607.1508, Florida Stati	ites, the above-named coi	riporation submits this statement for the	- h	
office or reg agent Lam	o the provisions of Sections burlus gistered agent, or both, in the Sta of familiar with, and accept the obli	502 and 607.1508, Florida Statu te of Florida. Such change was igations of, Section 607.0505, F	utes, the above-named col authorized by the corpora Florida Statutes	ation's board of directors. I hereby acc	cept the appointment a	s registered
	ofne provisions of Sections 607.05 gistored agent, or both, in the Sta i familiar with, and accept the obli	502 and 607.1508, Florida Stati te of Florida. Such change was igations of, Section 607.0505, F	ites, the above-named col authorized by the corpora Florida Statutes	rporation submits this statement for the ation's board of directors. I hereby acc	ept the appointment a	s registered
IGNATURE	igi ahro , typied or peinted caron of registered a	agant and title if applicable (NC	OTE: Registered Agent signature req	uired when reinstating)	DATE	
IGNATURE Si	og also, typied or pointed name of registered a OFFICERS A	agent and title if applicable (NC	OTE: Registered Agent signature requ		DATE FICERS AND DIRECTO	RS IN 12
IGNATURE Signature	OFFICERS A	agant and title if applicable (NC	DTE: Registered Agent signature request. 13. 1.1 TITLE	uired when reinstating)	DATE	RS IN 12
ICGNATUFIE S4 1LE AME	OFFICERS A PSTD LAPRESS, PAMELA S	agent and title if applicable (NC ND DIRECTORS	DTE: Registered Agent signature required 13. 1.1 Title 1.2 NAME	uired when reinstating)	DATE FICERS AND DIRECTO	RS IN 12
IGNATURE 2. ILE SME IHEEL ADDRESS	OFFICERS A PSTD LAPRESS, PAMELA S 1170 LEE WAGNER BOULEV	agent and title dispolicable (NO NO DIRECTORS DELETE	13. 1.1 Title 1.2 NAME 1.3 STREET ADDRESS	uired when reinstating)	DATE FICERS AND DIRECTO	RS IN 12
CONATURE Su LILE AME THEFT ADDRESS LIV. ST. 700	OFFICERS A PSTD LAPRESS, PAMELA S	agent and title if applicable (NO NO DIRECTORS DELETE /ARD, SUITE 107	TE: Registered Agent signature requests 13. 1.1 Title 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY- ST-ZIP	uired when reinstating)	DATE FICERS AND DIRECTO	RS IN 12
SIGNATUFIE 2. HILE HAME THEFT ADDRESS LIV ST. 710	OFFICERS A PSTD LAPRESS, PAMELA S 1170 LEE WAGNER BOULEV	agent and title dispolicable (NO NO DIRECTORS DELETE	13. 1.1 Title 1.2 NAME 1.3 STREET ADDRESS	uired when reinstating)	DATE FICERS AND DIRECTO Change	RS IN 12
IGNATURE 2. ILE AME IRREL ADDRESS IVV.ST. 7IP ILE AME	OFFICERS A PSTD LAPRESS, PAMELA S 1170 LEE WAGNER BOULEV	agent and title if applicable (NO NO DIRECTORS DELETE /ARD, SUITE 107	13. 1.1 TiTLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME	juved when reinstating) ADDITIONS/CHANGES TO OFF	DATE FICERS AND DIRECTO Change	RS IN 12
IGNATURE Z. ILE AME IREEL ADDRESS YY ST ZIP ILE AME IREEL ADDRESS	OFFICERS A PSTD LAPRESS, PAMELA S 1170 LEE WAGNER BOULEV	agent and title if applicable (NO NO DIRECTORS DELETE /ARD, SUITE 107	DTE: Registered Agent signature requests 1.1 Title 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY- ST-ZIP 2.1 TITLE	juved when reinstating) ADDITIONS/CHANGES TO OFF	DATE FICERS AND DIRECTO Change	RS IN 12
CGNATURE Se 2. LLE ME HEET ADDRESS TY - ST - ZIP LLE MAE REET ADDRESS TY - ST - ZIP	OFFICERS A PSTD LAPRESS, PAMELA S 1170 LEE WAGNER BOULEV	agent and title if applicable (NO NO DIRECTORS DELETE /ARD, SUITE 107	13. 1.1 TiTLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY- ST- ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS	juved when reinstating) ADDITIONS/CHANGES TO OFF	DATE FICERS AND DIRECTO Change	RS IN 12 Additio
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