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

**PROFIT CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mertitam ?

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000085448 (4)

**83 INTERNATIONAL, INC.** 

Principal Place of Business

The state of the s

Mailing Address

## **FILED** Apr 18 1997 8:00am Secretary of State



600 N.E. THIRD AVENUE FORT LAUDERDALE FL 33301	500 N.E. THIRD AVENUE FORT LAUDERDALE FL 333	01-3236		
			3. Date Incorporated or Qualified 10/14/1996	3a. Date of Last Report
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21 1515 University Dr	. 26 1515 Unive	rsity Dr	65-0702-739	Not Applicable
Sulte, Apt. #, etc.	Suite, Apt. #, etc.			<b>¢0 75</b> Audition 1
22	27		5. Certificate of Status Desired	Fee Required
City & State	Land the second		6. Election Campaign Financing	\$5.00 May Be
23 Coral Springs, Fl	Springs, Fl 28 Coral Springs, Fl		Trust Fund Contribution	Added to Fees
Zip Country US.	7 Zip	Country USA	8. This corporation has liability for it Florida Statutes	ntangible tax under s. 199.032,
9. Name and Address of Cu	rrent Registered Agent		10. Name and Address of New Reg	sistered Agent
MILLER, JOEL 81 382 Q. SICKLES				
The state of the s			12.5/CICLUS	1-3
FORT LAUDERDALE FL 33301			ress (P.O. Box Number is Not Acceptab	Stem8
*		84 City COLA	LSBRINGS	FL 85 Zip Code 3 3 0 7/
11. Pursuant to the provisions of Sections 607 office or registered agent, or both, in the Sagent. I am families with, and accept the games.	.0502 and 607.1508, Florida Statutes late of Florida. Such change was au ⊭ligations of, Section 607.0505, Flori	the above-named corp thorized by the corporat da Statutes.		, ,
SIGNATURE Signature, typed or printed partie of registere	La BERT	R.SICKLA Registered Agent signature requir	ed when reinstating)	3/27/97 DATE
12. OFFICERS	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS IN 12
TITLE \ D	<b>K</b> K0ELETE	1.1 TITLE	D D	Change Addition
NAME : MILLER, JOEL		1.2 NAME	D-P	[
STREET ADDRESS 500 N.E. THIRD AVENUE		13 STREET ADDRESS	Bert Sickles	] }
CITY-ST-ZIP FORT LAUDERDALE FL 33	301	14 CITY-ST-ZIP	Coral University D	r. Fl 33071
TITLE	☐ DELETE	21 TITLE		Change Addition
NAME		2.2 NAME		-
STREET ADDRESS		2.3 STREET ADDRESS		
CITY-ST-ZIP		2. 4 CITY - \$1 - ZIP		
TITLE	☐ DELETE	3.1 TITLE		Change Addition
NAME		3.2 NAME		
STREET ADDRESS		3.3 STREET ADDRESS		Í
CITY-ST-ZIP		3.4 CITY-S1-ZIP		
TITLE	DELETE	4.1 YOLE		Change Addition
NAME		4. 2 NAME		
STREET ADDRESS :		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		Į.
TITLE	DELETE	5.1 TITLE		Change Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP				
TITLE	DELETE	5.4 CITY-ST-ZIP 6.1 TITLE		Change Addition
NAME				ET custings ETT variabili
		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
City-St-ZiP	olied with this filing does not available	6.4 City-St-2iP	Lin Section 119 07/3Vi) Elorido Statutos	Lhurther certify that the

I do hereby certify that the information supplied with this tiling does not quality for the exemption stated in section 139.07(5)(1). Florida Statutes. 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 attachment with an address.

BEELT Q. SICKUES