SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

P96000085804 (8)

1998

Principal Place 3361 SW THIRD		Mailing Address 3361 S.W. THIRD AVENUE			
SUITE 102 MIAMI FL 33145				DO NOT WRITE IN T	HIS SPACE
US				3. Date Incorporated or Qualified	THOU NOL
				10/17/1996	
2. Principal Pla	ace of Business	2a. Malling Address		4. FEI Number	Applied For
21 26			65-0701184	Not Applicable	
Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional	
22 27		City & State		6 Florian Consolina Financian	Fee Required
23 28				6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation owes or has pald the	
24	25	29	0	Personal Property Tax due June 30.	Yes No
	9. Name and Address of Curre	ent Registered Agent	81 Name	10. Name and Address of New Registe	red Ag ent
BAMBERGER, IVOR					
3361 S.W. THIRD AVENUE			82 Street Add	dress (P.O. Box Number is Not Acceptable)	
MIAMI FL 33145					
			83		
	٨		84 City		85 Zip Code
11. Pursuant t	to the provisions of sections 607.05	02 and 607.1508, Florida Statutes,	the above-named corp	-	
office or re agent. I ar SIGNATURE _	- Marie	\ /		oration submits this statement for the purpose of tion's board of directors. I hereby accept the ap	
	Signature, types of prilited name of registered ag	- I	E: Registered Agent signature rea		<u> </u>
12.	OFFICERS A	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS	
	BAMBERGER, IVOR	L_ DELETE			Change Addition
l I	3361 S.W. THIRD AVENUE		1.3 STREET ADDRESS	ULIO E. MENDEZ 1361 S.W THIRD AUGUUB	
	MIAMI FL 33145		1.4 CITY-ST-ZIP	(1AM), Pl. 33145	
	P	DELETE	2.1 TITLE	(0.00.) 1. 00. 10	Change Addition
NAME	REBULL JR. JULIO	DECENE	2.2 NAME		C Sharige C McGillon
STREET ADDRESS	3361 SW 3RD AVE		2.3 STREET ADDRESS		
CITY-ST-ZIP	MIAMI FL		2.4 CITY-ST-ZIP		
	D .	DELETE	3.1 TITLE		Change Addition
	BEBER, JENNIFER		3.2 NAME		-
	3361 SW 3RD AVE		3.3 STREET ADDRESS		
	MIAMI FL		3.4 CITY-ST-ZIP		
I I	D CHARGOTCH ELABOR	. DELETE	4.1 TITLE		Change Addition
	SILVERSTEIN, ELAINE		4.2 NAME		
l l	3361 SW 3RD AVE		4.3 STREET ADDRESS		
1	MIAMI FL		4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		<u> </u>	5.4 CITY-ST-ZIP 6.1 TITLE		
TITLE		DELETE	1		Change Addition
NAME STOREST ANDRESS			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		

6.4 CITY-ST-ZIP 14. I 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 of 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 of or an attachment with an address.

9.8.98

305 856-9100

FILED

Sep 17 1998 8:00am

Secretary of State