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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mocthan,

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9600088659 (3)

76TH STREET CORP.

Principal	Place	of	Business
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Mailing Address

6150 SW 76 STREET SO MIAMI FL 33143 6150 SW 76 STREET SO MIAMI FL 33143-500

FILED Jun 03 1997 8:00am Secretary of State



SO MIAMI FL 33143		50 MIAMI FL 33143-500	SO MIAMI FL 33143-9002							
						3. Date Incorporated or Qualified 10/28/1996	3a. Da	3a. Date of Last Report		
	lace of Business	2a. Mailing Address				4. FEI Number			Appli	ied For
21		26				65-0707644	-		Not A	Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75 Additional Fee Required		
City & State	е	City & State				Election Campaign Financing Trust Fund Contribution			M 00. ded to l	
Zip	Country	Zip	Cou	ntry	,	8. This corporation has liability for it	ntangible	tax unc	Jers. 1	99.032,
24	26	29	30				Yes [
	9, Name and Address of Cur	rent Registered Agent			·	10. Name and Address of New Re-	gistered /	lgent		
	NE, THOMAS E			81	Name					
	SW 76 STREET			82	Street Add	ress (P.O. Box Number is Not Acceptab	le)			
80 1	MIAMI FL 33143			83						
				84	City		···	85	Zip Co	de
					L	poration submits this statement for the p	<u>FL</u>			
office or re agent. I as SIGNATURE	egistered agent, or both, in the St m familiar with, and accept the ob	ate of Florida. Such change wa oligations of, Section 607.0505,	s authorized Florida Stat	d by utes	y the corpora s.	thon's board of directors. I hereby accept	t the app	ointmen	it as req	gistered
	Signature, typed or printed name of registered	·		d Ag∈	tper stuteng a Ins	ried when reinstating)	DATE	5.056		
12.	D OFFICERS A	AND DIRECTORS DELETE	13.			ADDITIONS/CHANGES TO OFFIC	ERS AND	Char		IN 12 Addition
NAME *	BYRNE, THOMAS E		1.1 VI					Ulai	igo L	
STREET ADDRESS	6150 SW 76 STREET				ADDRESS					
	SO MIAMI FL 33143				· · · · · · · · · · · · · · · · · · ·					
CITY-ST-ZIP	00 MRXIII 1 E 00110	DELETE	2,110		ST-ZIP			Char	noe I	Addition
NAME			2.2 N/						.90 [riacition
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP					SI-ZIP					
TITLE		DELETE	311		31 211			Char	nge	Addition
NAME			32 N/	ME						
STREET ADDRESS			3 3 ST	REET	ADDRESS					
CITY-ST-ZIP			3 4. 0	11Y - 9	S1-21P					
TITLE		DELETE	4,1 11					Chai	nge [Addition
NAME	II		4. 2 N	AME	Ì					
STREET ADDRESS			4.3 ST	REET	ADDRESS					
CITY-ST-ZIP			4.4 CI	TY-S	ST - 71P					
TITLE		DELETE	5.1 TO	ΓLE				Char	nge [Addition
NAME			5.2 NA	ME						
STREET ADDRESS			5381	REFT	ADDRESS					
CITY-ST-ZIP			5.4 CI	1Y-S	ST - ZIP					
TITLE		☐ DELETE	6.1 10	ſLÉ				Char	nge [Addition
NAME			6.2 N/	ME						
STREET ADDRESS			6.3 \$1	REET	ADDRESS					
CITY-ST-ZIP			6.4 CI	1Y-S	51 - ZIP					

14. Ido 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 chapted, or on an arachiment with an address.

2000 - 100 March 20 3015-111-010