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

Mailing Address

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

**FILED** 

Mar 05 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P96000094785 (8)

AMERICAN PRICE BUSTER CORP.

1300 N.E. MIAMI GARDENS DRIVE #204 1300 N.E. MIAMI GARDENS DRIVE #204 NORTH MIAMI BEACH FL 33179 NORTH MIAMI BEACH FL 33179-4730 3. Date Incorporated or Qualified 3a. Date of Last Report 11/13/1996 2. Principal Place of Business 2a. Mailing Address Applied For 26 Not Applicable Suite, Apt. #, ctc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 Fee Required 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Country B. This corporation has liability for intangible tax under s. 199.032 25 24 29 30 Florida Statutes Yes 🗌 No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name LEVINE, JACK 16855 N.E. 2ND AVENUE #303 82 Street Address (P.O. Box Number is Not Acceptable) NORTH MIAMI BEACH FL 33182 83 Zio Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. Lam familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Suproture days it in product name of register of layers as it allost applicable (NOTE\_Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE Change HILE 1.1 TITLE Addition LEHRER, YELENA NAME 1.2 NAME 1300 N.E. MIAMI GARDENS DRIVE #204 STREET ADDRESS 1.3 STREET ADDRESS NORTH MIAMI BEACH FL 33179 C. TY - S1 - ZIF 1.4 City - St - Zir DELETE TiTLE 2.1 TITLE Change Addition LEHRER, SAUL NAME 22 NAME 1300 N.E. MIAMI GARDENS DRIVE #204 STREET ADDRESS 2.3 STREET ADDRESS NORTH MIAMI BEACH FL 33179 City St. Zit 2. 4 CITY - ST - ZIP DELETE TITLE Change Addition 3.1 TITLE NAME 3.2 NAME STREET ADDRESS. 3.3 STREET ADDRESS CHY-ST ZIP 3.4. CITY - ST - ZIP DELETE THE Change Addition 4.1 TOLE MW: 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS C-13 - 51 - 71P 4.4 CITY - ST - ZIP DELETE Change 711(-7) 5.1 TITLE Addition NAME 5.2 NAME STREET ADDRESS. 5.3 STREET ADDRESS CHY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Title 6.1 TITLE Change Addition 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY - 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 supplicmental 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

elena