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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 03 1998 8:00am Secretary of State

LIBRERI MAPOU BOOKSTORE, IN	0037446 (6) c.		T THE HARD THE PRINT THE REAL BRIDE BROWN BROKE AND	ije 1884 bish 61818 bile 1884
District Dis	National Control			
Principal Place of Business	Mailing Address			
5919 NE 2ND AVENUE MIAMI FL 33137	5919 NE 2ND AVENUE Miami Fl 33137			
			DO NOT WRITE IN THIS 3. Date Incorporated or Qualified	SPACE
			04/25/1997	
2. Principal Place of Business	2a. Muiling Address		CCINI	Applied For
21 5919 NE 2nd Ave		6	65-0762188	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	<i>2</i> 1	5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State	· 1	6. Election Campaign Financing	\$5.00 May Be
23 MIAMI, H	28 MIAMI	, re	Trust Fund Contribution	Added to Fees
Zip ZZ ZZ Country // Country	29 33299 30	Country U.S	8. This corporation owes or has paid the cu	·
24 00101 25 US			Personal Property Tax due June 30. 10. Name and Address of New Registered	Tes ∐ No Agent
CHERIN, STARLA V		81 Name	•	
301 NE 125 STREET		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
NORTH MIAMI FL 33161				
ч		83		
	<i>^</i>	64 City	FL	85 Zip Code
11. Pursualit to the provisions of Sections 607.050	02 and 60 1508, Florida Statutes,	the above-named corp		
11. Pursualt to the provisions of Sections 607.050 office or registered agent, or both, in the State agent. I am familiar with, and accept the oblig-	of Flores Such change was authorized of Section 607,0505. Florid	horized by the corporal da Statutes.	tion's board of directors. Thereby accept the ap	pointment as registered
SIGNATURE	7			·
Signaturu, typed or printed sand or register and		egistered Agent signature requi	olfed when reinstating) DATE	
Signature, typed or printing arms or region. 12. OFFICERS AN	D DIRECTORS	13.		ID DIRECTORS IN 12
Signaturu, typed or printed damo or region	D DIRECTORS DELETE		olfed when reinstating) DATE	
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officer or director of the corporation of the receiver or fuelue 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.

869-1283