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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P97000077407

FLICK ENTERPRISES, INC.

**FILED** Apr 28 1998 8:00am Secretary of State

	·			
Principal Place of Business	Mailing Address	) O-ND-		
10800 S.W. 122, ND S	JL 10800 7'N	N 188 2	<b>□</b>	
MIAMI, FL 33176 MIAMI, FL 33176			DO NOT WRITE IN THIS SPACE	
			3. Date incorporated or Qualified 9/5/1997	_
2. Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	26			Not Applicable
Suite, Apt. #, etc	Suite, Apt. # etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State	Cris P. Crots			Fee Required
23	City & State		6. Election Campaign Financing Trust Fund Contribution	<b>\$5.00</b> May Be
Zip Country	7 <sub>(D</sub>	Country	8. This corporation owes or has paid the c	Added to Fees
24 25	<u></u>	30	Personal Property Tax due June 30.	Yes No
9. Name and Address of Curre			10. Name and Address of New Registers	d Agent
SHERR, ALAI	1	81 Name		
	. AIA	82 Street Add	dress (P.O. Box Number is Not Acceptable)	
10800 S.W. 122 NO ST. MIAMI, FL 33176  82 Street Address				
MILLINI FI 33	1176	83		
Million   C = = =	,,,	84 City	F	85 Zip Code
11. Pursuant to the provisions of Sections 607.050	12 and 607 1508. Florida Statutes	the above-named core	poration submits this statement for the purpose	of openage its registered
office or registered agent, or both, in the State	ro' Horida. Such change was au	thorized by the corpora	tion's board of directors. I hereby accept the ap	ppointment as registered
agent I am familiar with, and accept the obligations of, Section 607.0505, Florida Statute's.  SIGNATURE QUILLY Sherr ALAN SHERR 4/23/98				
		Registered Agert signature requ	ited when rehistating) DATE	<u> </u>
12. OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFICERS AT	
PRESIDENT AND S	ECRETAKY DELFE	11 THILE		☐ Change ☐ Addition
NAME ALAN SHERR STREET ADDRESS 10800 5.W. 122	NA CT.	1.2 NAME		3
		1.3 STREET ADDRESS		ì
CITY-ST-ZIP MIAMI, FL 35	> / /G □ DELETE	1.4 CHY- S1- ZIP 2.1 TIBLE		Change Addition
NAME		2.2 NAME		E citalgo E Montali
STREET ADDRESS		2.3 STREET ADDRESS		
CITY-ST-ZIP		2. 4 CITY- ST-ZIP		
TITLE	☐ DELETE	3 1 TITLE		☐ Change ☐ Addition
NAME		3 2 NAME		
STREET ADDRESS		3.3 STHEET ADDRESS		
CITY-ST-ZIP	THE ETT	3 4 CITY - ST - ZIP		The state of the s
TITLE .	☐ DECETE	41 TITLE		☐ Change ☐ Addition
NAME ethery annue ce		4 2 NAME		
STREET ADDRESS CITY-ST-ZIP		4.3 STREET ADDRESS		
TITLE	DELETE	4.4 CITY-SI-7/P 5.1 TITLE		ChangeAddition
NAME	<del>-</del> · · · -	5 2 NAME		
STREET ADDRESS		53 STREFT ADORESS		りごろ
CITY-S1-ZIP		5.4 CHY+S1+7IP		4.28
TITLE	☐ DELETE	61 TITLE	7000025049	Chinge Addition
NAME		6.2 NAME	-04/29/9801016	-004
STREET ADDRESS		6.3 STREET ADORESS	***150 <b>.</b> 00	
CITY-ST-ZIP		6.4 CITY - SI - ZIP		

14. Thereby certify that the information supplies with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Flor da Statutes. I further certify that the information indicated on this annual report or suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath; that I am an officer or director of the corporation or the receiver or trusted 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

ACURE, PRES. ALAN SHERR 4/23/98

NTED NAME OF SIGNING OFFICER OR DIRECTOR

305-233-6978