-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

<u>1998</u>

DOCUMENT # P97000079552 (0)

FILED May 04 1998 8:00am Secretary of State

PROJE	CT ENTERPRISES, INC.					
Principal Place of Business Mailing Address 1303 N.W. 127TH DRIVE 1303 N.W. 127TH DRIVE SUNRISE FL 33323 SUNRISE FL 33323					DO NOT WRITE IN THIS	
					3. Date Incorporated or Qualified 09/12/1997	
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number	Applied For
21					APPLIED FOR	Not Applicable
\$uite, Apt.		Suite Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stat	lo	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country Zip C		Countr 30	y	This corporation owes or has paid the corporation Personal Property Tax due June 30.	urrent year Intangible
	9. Name and Address of Curre				10. Name and Address of New Registered	
AD	AMS, GALLINAR & IGLESIAS, P.	A .	81	Name	1	
701 BRICKELL AVENUE			82	Street Add	dress (P.O. Box Number is Not Acceptable)	***
	IITE 2150 Ami FL 33131		83	3		
			84	City	FI	85 Zip Code
11. Pursuant office or r agent. I a SIGNATURE					rporation submits this statement for the purpose ation's board of directors. I hereby accept the ap	of changing its registered pointment as registered
12,	Signature, typed or proted name of registered ag	ID DIRECTORS	13.	jeni signature requ	DATE ADDITIONS/CHANGES TO OFFICERS AN	D DIDECTORS IN 40
TITLE	D	DELETE	1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS AN	Change Addition
NAME	LA RUSSA, GIUSEPPE		1.2 NAME			
STREET ADDRESS	1303 N.W. 127TH DRIVE		1.3 STREE	T ADORESS		
CITY-ST-ZIP	SUNRISE FL 33323		1.4 CITY-	ST - ZIP		
TITLE		DELETE	21 1HLE			Change Addition
NAME		22 M				
STREET ADDRESS			23 STREE	T ATODRESS		
CITY-ST-ZIP		·· '— `— —	2 4 CHY	S1 - ZIP		
TITLE	■		3 1 THLE			Change Addition
NAME			3.2 NAME			
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP TITLE		DELETE	3.4. CITY - 4.1 Trīle	SI-ZIP		Change I Addition
NAME		C) becel	4.1 THE			Change Addition
STREET ADDRESS				T ADDRESS		
CITY-ST-ZIP			4.4 CITY-			
TITLE		DELETE 5.1 TI		21.20		Change Addition
NAME			5.2 NAME			
STREET ADDRESS				1 ADDRESS ,	U salili.	
CITY-ST-ZIP			5.4 CITY -		hu 5/4/6//	
TITLE	The state of the s	DELETE	6 1 TITLE		5000025106	hange Addition
NAME			6.2 NAME		-05 /05/98010350	06 I
STREET ADDRESS			6.3 STREE	T ADDRESS	-05/05/98010350 ***150.00	
CITY-ST-ZIP			6 4 CITY -			
A A I hanaba	certify that the information supplied w	ith this files, do so not suglified	for the even	at an atatani i	o Section 119 07/31/i) Florida Statutos I further o	and the state of t

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 suppliering that 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 conjugation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, go on an artiscliment without address.

01011471177

CINCEDEL IN DUCE

Tidos 1904 922- 2