## 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

1998

STREET ADDRESS

CITY-ST-ZIP

**DOCUMENT #** P97000108371 (0)

1. Corporatio	IVE MOVES FOR PRECIOU		(0)						
Principal Place of Business Mailing Address						- I HARICAN LIA KRITI KANTI ANKI NAZIL NATAL NISAL NI		881 1181 1881	
1301 RIVER REACH DRIVE, STE.106 1301 RIVER REACH DRIVE, STE.106									
FT. LAUDERDALE FL 33315 FT. LAUDERDALE FL 33315						DO NOT WRITE IN THIS SPACE			
						3. Date Incorporated or Qualified	SPACE		
)						12/26/1997			
2. Principal F	2a. Mailing Addr	dress			4. FEI Number	I IAr	oplied For		
21 26						65-0804534	F +	ot Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #,	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75	Additional	
22		27				5. Certificate of Status Desired		equired	
City & Stat	le	City & State				6. Election Campaign Financing		May Be	
23	Country	Zip		ountry		Trust Fund Contribution	Added		
Zip 24	25	29	30	unay		<ol> <li>This corporation owes or has paid the cu Personal Property Tax due June 30.</li> </ol>		angible No	
29	9. Name and Address of Curre		[30]	1		10. Name and Address of New Registered			
M	UNIZ, TERRY L			81 1	Name				
ANA DIED DESCRIPTION OF AND					Ctroot Addr	ess (P.O. Box Number is Not Acceptable)			
FT. LAUDERDALE FL 33315					olieel Addie	ass (F.O. Box Mulliber is 1401 Acceptable)		ļ	
· it bibbbishes to oote				83					
	•			84 (	City		85 Zip (	Code	
	•			,	ULY	Fl	.   OS   Zip '		
11. Pursuant office or r agent. La SIGNATURE	to the provisions of Sections 607.05 registered agent, or both, in the Stat am familiar with, and accept the obli	02 and 607.1508, Florid e of Florida. Such chan gations of, Section 607.	la Statutes, the ge was authoriz 0505, Florida Sta	above-n ed by th atutes.	amed corporation	oration submits this statement for the purpose on's board of directors. I hereby accept the ap	of changing it pointment as	s registered registered	
	Signature, typed or printed name of registered as				signature require	d when reinstating) DATE			
12. TITLE	D OFFICERS AF	ND DIRECTORS	13 FIE 11		<del></del>	ADDITIONS/CHANGES TO OFFICERS AN	Change	S IN 12	
NAME	D DELETE DELETE		4	1.1 TITLE 1.2 NAME		•	L. Unange	La rodition	
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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 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 changed, or on an attachment with an address. (454)

6.4 CITY-ST-ZIP

6.3 STREET ADDRESS

**FILED** 

Mar 20 1998 8:00am

Secretary of State