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

PROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

	1997	DIVISION OF COL	TONATIONS		
DOCUN 1. Corporation	MENT # \$509	32 (0)		:	
	ITIONAL BUSINESS MA	NAGEMENT, INC.			
					1324 5164 6160 1666 6241 6361 1561
Principal Place of Business M		Mailing Address			STEAL THUS HOLD IT ESSET THESE CHANGES
\$850 HOLLYWOOD BOULEVARD			3850 HOLLYWOOD BOULEVARD		
SUITE 400 HOLLYWOOD FL 33021		SUITE 400 HOLLYWOOD FL 33021-8746	SUITE 400 HOLLYWOOD FL 33021-8746		
					3a. Date of Last Report 02/14/1996
h	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21		Suite, Apt. #, etc.	· · · · · · · · · · · · · · · · · · ·	65-0263391	Not Applicable
Suite, ΑρΙ #, εΙο. 22			27		Fee Required
City & State		City & State			\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip }~~~	Country	Zip	Country	8. This corporation has liability for i	ntangible tax under s. 199.032, Yes No
24	25 9. Name and Address of C	29 30 urrent Registered Agent	01	Florida Statutes 10. Name and Address of New Re	
LEVE	NTHAL, S.L.		81 Name		
SOEN HOLLYWOOD BOILLEVADD			82 Street Ad	dress (P.O. Box Number is Not Acceptab	<u> </u>
SUITE 400				areas (1.0. Box Humber is Not Accoptan	10)
HOL	LYWOOD FL 33021		B3		
			84 City		85 Zip Code
41 Directort	to the provincions of Continuo 60	7 0502 and 607 1509 Florida Statutos	the above named co	provention cultimite this etalement for the c	FL 27 Code
office or n	egistered agent, or both, in the	State of Florida Such change was aut	horized by the corpor	orporation submits this statement for the parties acceptation's board of directors. I hereby acceptations	of the appointment as registered
)	п тапшаг with, ало ассерт те	obligations of, Section 607.0505, Floric	ia Statules.	•	
SIGNATURE :	Signature: typed or partied name of mg sta	red agent and file if applicable (NOTE: F	Registered Agent signature req		DATE
12.	OFFICER	S AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTORS IN 12 Change Addition
TIFLE	MIDDLEMAN, APRIL C.	DELETE	1.1 TITLE 1.2 NAME		Change Audition
NAME STREET ADORESS	3850 HOLLYWOOD BLVD	\$400	1.3 STREET ADDRESS		
CHY-ST-ZIF	HOLLYWOOD FL		1.4 CITY-ST-ZIP		
TITLE	STD	☐ DELETE	2 I TITLE		Change Addition
HAME	LEVENTHAL, S.L.	• • • •	2.2 NAME		
STREET ADORESS			2.3 STREET ADDRESS		
CHY-ST-ZIP	HOLLYWOOD FL	T britze	2 4 CITY-ST-ZIP		
TIELF		DELETE	3.1 TITLE		Change Addition
NAME STREET ADDRESS			3.2 NAME 3.3 STREET ADDRESS		
CITY-ST-ZIP			34. DITY-ST-ZIP		
MILE		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ACORESS			4.3 STREET ADDRESS		
CITY - ST - 2H		DEL ÉTE	4.4 CITY-ST-ZIP	741	Channa I Addison
THUE		☐ DELETE	5.1 TITLE		Change Addition
NAME Cruter and become			5.2 NAME		
STREET ADDRESS CITY-ST-ZIP			5.3 STREET ADDRESS 5.4 City-St-Zip		
1011-81-2ir		DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
Crity+Sr-7IP			6.4 CITY-ST-ZIP		

14. I do nereby certify that the information supplied with this titing 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 entago attachment with an address.

SIGNATURE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

President

4/10/97

(954)989-2200

FILED

Apr 15 1997 8:00am

Secretary of State

0130197