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

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

3500 MADISON STREET



FLÖRIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # S67884

MADISON INTERNATIONAL CORP.

(4	۱

Mailing Address

5508 MADISON STREET

FILED Jun 13 1997 8:00am Secretary of State



HOLLYWOOD I	FL 33021	HOLLYWOOD FL 33021-7	1136				
					3. Date Incorporated or Qualified 07/18/1991	3a. Date 08/12/	of Last Report
2. Principal P	lace of Business	2a. Mailing Address 26	7 F - STREET - 1 BUY - 1		4. FEI Number 65-0277541		Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		8.75 Additional Fee Required
City & State	е	City & State	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees
Zip 24	Country 26	Zıp	Countr 30	У	This corporation has liability for in Florida Statutes	ntangible tax	
571	9, Name and Address of Currer				10. Name and Address of New Reg		
LOZ	ANO, MAGALIE MORISSET		81	Name		,	
5506	MADISON ST					 	
	LYWOOD FL 33021		82	Street Add	dress (P.O. Box Number is Not Acceptable)	le)	
1196			83	 		· · · · · · · · · · · · · · · · · · ·	
4							
			84	City		FL	5 Zip Code
11. Pursuant	to the provisions of Spolions 607 050	2 and 607 1508 Florida State	the the above	o-named cor	poration submits this statement for the p		anging its topictored
office or r	egistered agent, or both, in the State	of Florida. Such change was	authorized b	v the corpora	polation submits this statement for the plation's board of directors. I hereby accep	t the appoint	ment as registered
agent. I a	m familiar with, and accept the oblig	ations of, Section 607.0505, F	Iorida Statute	S.			-
SIGNATURE	Signature, typed or printed name of registered age	bot and tile of norders to	Series and the series are the series and the series are the series and the series are the series and the series and the series are the series and the series				
12,	Signature, typed or printed name or registered ago OFFICERS AN		13.	eni signature requ	ited when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE DE	DECTORS IN 10
TITLE	P	DELETE	1.1 TRUE	-	ADDITIONS/CHANGES TO OFFIC		Change Addition
NAME	LOZANO, MAGALIE M						Shange LI ROUSION
STREET ADDRESS	5508 MADISON ST		12 NAME	Langue			
	HOLLYWOOD FL			I ADDRESS			
CITY-ST-ZIP	V	DELETE	1.4 C(TY-1	51 - 7IP			Change Addition
	LOZANO, GERARDO V.	□ bettie	21 1171.6			Ц	Change
NAME .	5508 MADISON ST		2 2 NAME				
STREET ADDRESS	HOLLYWOOD FL		1	ADDRESS			
CITY-ST-ZIP	HAPTHAAA LE	DELETE	2. 4 C/TY-	SI - 7IP			A
TITLE		☐ DELETE	3.1 THTLE			[]	Change Addition
NAME			3.2 NAME				
STREET ADDRESS				ADDRESS			
CITY-ST-ZIP		DELETE	3.4. CITY -	S1 - ZIP			
THE		☐ DELETE	4.1 TITLE			Ц	Change Addition
NAME			4. 2 NAME				
STREET ADDRESS				ADDRESS			
CITY-ST-ZIP			4.4 CITY - 5	S1 - ZIP			···
THLE		☐ DEL€1E	5.1 TITLE				Change
NAME			5.2 NAME				
STREET ADDRESS			5.3 STREE	ADDRESS			
CITY-ST-ZIP			5.4 CITY - S	ST - ZIP			
TITLE		DELETE	61 TITLE				Change
NAME			6.2 NAME				
STREET ADDRESS			6.3 STREE	ADDRESS			
CITY-ST-ZIP			6.4 CITY-5	ST - ZIP	1		

I do 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 accumant with an address.