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



FLORIDA DEPARTMENT OF STATE

**FILED** 

Mar 25 1998 8:00am

ANNUAL REPORT			DIV	Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS					Secretary of State						
DOCU 1. Corporatio 15320		S69627		(5)											
Delevised Olev	( Q		\$ # - 11 A - J - J	·	**										
	e of Business	Mailing Addr					1								
15320 N.W. 7 MIAMI FL 330			2807 SW 27TH AVENUE MIAMI FL 33133				J	_==							
U\$								-	3. Date Incorporated or Qu		E IN THIS	SPACE			
								1	07/19/1991	aiiiiou					1
2. Principal P	lace of Business		2a. Mailing A	dress		_			4. FEI Number				Appl	ied For	7
21			26						65-0280039				Not /	pplicabl	e
Suite, Apt.			Suite, Apt						5. Certificate of Status Desi	red		\$8.75 Fee	5 Add Regu		
City & Stat	e		City & Sta	te					<ol><li>Election Campaign Finar Trust Fund Contribution</li></ol>	cing		\$5.0 Adde	<b>)0</b> м ed to l		
Zip	Co	ountry	Zip		Coun	itry			8. This corporation owes or	has p		irrent year			ヿ゙
24	25		29		00				Personal Property Tax du			Yes		No	_
		ddress of Current I	Hegistered Ager	<u>)t</u>		B1	Name		10. Name and Address of N	lew Ke	gistered	Agent			$\dashv$
	HAN, RICHARD	J.			L	_ l_									╛
	07 <b>S</b> W 27 AVE AMI FL 33133		82			Street /	Address	(P.O. Box Number is Not Ac	cepta	ble)				ı	
MIN	AMI PL 33133				8	B3									┨
					ء ا	84 (	City					OE   7	io Co	do	4
		<u> </u>			- 1		•				FŁ	_   1 1 1	•		-
11. Pursuant office or r	to the provisions of	Sections 607.0502	and 607 1508, Fl	orida Statutes	the abo	ove-r	iamed ne corc	corpora	ation submits this statement for 's board of directors. I hereb	or the	purpose o	of changing	jits r	egistered	ı T
agent I a	m familiar with, apc	accept the obligati	is of, Section 6	07.0506, Flori	da Statul	tes.	T 7	SZATT /	Lav		3	116/5	10		
SIGNATURE	Storage typed or lides	I name I registered agent	d No it approable.		CHAI		=	YOHA	Nen (einstating)		DATE	/16/9	<u>'0</u>		
12.		OFFICERS AND			13.	gont			ADDITIONS/CHANGES TO	OFFI		D DIRECT	ORS	N 12	-1
TITLE	PD		8	DELETE	1,1 TITL	.E						Change	e [	Additio	<u>آ</u> إ
NAME	REDFORD, JAMES F. JR.				1.2 NAME									- [;	
STREET ADDRESS			1.5		1.3 STAE	1.3 STREET ADDRESS									
CITY-S1-ZIP	MIAMI FL					1.4 CITY-ST-ZIP						Chan		1 448	_ }
TITLE NAME	SVD YOHAN, RICHARD		_			2.1 III.E 2.2 NAME						☐ Changi	8 L	Additio	' `
STREET ADDRESS	2807 SW 27TH AVENUE				•	2.3 STREET ADDRESS									1
CITY-ST-ZIP	MIAMI FL				2. 4 CiT		- 1								
TITLE	TO		☐ DELETE			3.1 TITLE						Change	e [	Additio	7
NAME	GOTTLIEB, JAY				3.2 NAME									1	
STREET ADORESS	1411A1 P1				3.3 STRE	3.3 STREET ADDRESS									-
CITY-\$T-ZIP	MIAMI FL					3.4. CITY-ST-ZIP									4
TITLE						4.1 TITLE						Change	a L	Addition	<b>'</b>
NAME PAREST ADDRESS					4. 2 NAM		DDEGO								
STREET ADDRESS CITY-ST-ZIP					4.3 STRE		· 1								
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NAME			_		5.2 NAM		Į								
STREET ADDRESS					5.3 STRE		DRESS )								-
CITY-ST-ZIP					5.4 CITY	<u>- ST- Z</u>	<u> 11P</u>								
TITLE				DELETE	6.1 TITLE							Change	e [	Additio	ij
MAME (					E C S NAME	40	- (								Ì

14. Thereby 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 divisee 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 laddress.

63 STREET ADDRESS

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

TCHARD J YOHAN SECRETARY 3/16/98 305-441-2328