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

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUME

(0)

FILED Mar 10 1997 8:00am Secretary of State

	NT	#	S7	8888)
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DANSBY		Mahag Addison				
Principal Place of Business Mailing Address 5841 BISCAYNE BLVD. MIAMI FL 33137 MIAMI FL 33137 MIAMI FL 33137						
					3. Date Incorporated or Qualified 09/06/1991	3a. Date of Last Report 02/27/1996
2. Principal Pl	lace of Business	2a. Mailing Address 26		***************************************	4, FEI Number 65-0307524	Applied For Not Applicable
Suite, Apt	#, etc	Suite, Apt. #, etc.	2		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State 23	9	City & State			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Ζιρ 24	Country 25	Zip 29	Country 30			Yes No
L	 Name and Address of Current 	nt Registered Agent			10. Name and Address of New Re	glatered Agent
5841	ISMAN, MAURICE I BISCAYNE BLVD. VII FL 33137		81 82 83	Name Street Addr	ress (P.O. Box Number is Not Acceptab	ole)
			84	City		FL 85 Zip Code
office or r agent I a SIGNATURE.	to the provisions of Sections but, to be up gristered agent, or both, in the Stat in familiar with, and accept the obligation of the obligation of the state of the obligation of the state of the obligation of				poration submits this statement for the plants board of directors. I hereby accepted when reinstating)	ot the appointment as registered
12.	OFFICERS AF	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE	CERS AND DIRECTORS IN 12
TITLE	D	☐ DELETÉ	1.1 TITLE			☐ Change ☐ Addition
NAME	SUSSMAN, IRVING		1.2 NAME			
STREET ADDRESS	5841 BISCAYNE BLVD.		1.3 STREET	ADDRESS		
CITY-ST-ZIP	MIAMI FL		1.4 CITY-S	T-ZIP		
TITLE	D Sussman, Maurice	☐ DELETE	2.1 TITLE			Change Addition
NAME	5841 BISCAYNE BLVD.		2.2 NAME			: •
STREET ADDRESS	MIAMI FL		2.3 STREET	1		1
CHY+S1-7IP TITLE	D	DELETE	2. 4 CITY-5 3.1 TITLE	51 - 4H*		☐ Change ☐ Addition
NAME	SUSSMAN, SELIG		3.2 NAME			
STREET ADDRESS	5841 BISCAYNE BLVD.		3.3 STREET	ADDRESS		
City-S1-zip	Miami Fl		3.4. CITY - S	ST - ZIP		
TITLE		☐ DELETE	4.1 TITLE			☐ Change ☐ Addition
NAME			4. 2 NAME	J		
STHEET ADDRESS			4.3 STREET	address		
CITY-S1-7F			4.4 C/TY-S	T-ZIP		
THE		DELETE	51 TITLE			☐ Change ☐ Addition
NAME			52 NAME	ſ		
STREET ADDRESS			5.3 STREET			
CITY - ST - ZIP		T APLETE	5.4 CITY - S	T-ZIP		
TillE		DEFELE	6.1 TITLE	{		Change Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET			
CITY-ST-ZIP			6.4 CITY-S	T-ZIP		

14. 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 of 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 for the regulatory 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 charges, or on any tachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

0187277