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

1. Corporation	MENT # S9820 In Name IET ETC., INC.)5 (5)			
Principal Place of Business 115 KENSINGTON ROAD HOLLYWOOD FL 33021 US		Mailing Address BOX 817213 HOLLYWOOD FL 33081-1213 US		(NORMAND TO LOUIS ICHIN THOM ONAN GUM BURN BURN BURN BURN BURN BURN BURN BURN	
•				3. Date Incorporated or Qualified 12/02/1991 3a. Date of Last Report 05/16/1996	
•	lace of Business	2a. Mailing Address		4. FEI Number Applied For	
Suite Apt	# etc.		······································	65-0305682 Not Applicab	
22		27		5. Certificate of Status Desired Fee Required	
City & State	e.	City & State		6. Election Campaign Financing \$5.00 May Be	
23]	Country	28 Zip	Country	Trust Fund Contribution Added to Fees 8. This corporation has liability for intangible tax under s 199.032,	
24	25	29	30	Florida Statutes Yes No	
	9. Name and Address of Cur	rent Registered Agent	81 Name	10. Name and Address of New Registered Agent	
	LDWYN, BETH				
	KENSINGTON ROAD LLYWOOD FL 33021		82 Street Ad	dress (P.O. Box Number is Not Acceptable)	
1101	E111000 1E 00021		83		
			84 City	85 Zip Code	
	70	2000 1007 1000 5 11 011		FL ()	
office or r agent La SIGNATURE	irii familiar wiin, and accept ine od	ingations of, Section 607.0505, F	ionda Statutes.	orporation submits this statement for the purpose of changing its registero ration's board of directors. I hereby accept the appointment as registered	
12,	Signature, typed or printed name of registered OFFICERS	Lagent and tille of applicable (NC AND DIRECTORS	TE: Registered Agent signature re-	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
104f	PD	DELETE		T Parison Lauditi	
NAMÍ	GOLDWYN, BETH	•	1.2 NAME	GOLDWYN BETH. 115 KENS. NOTEN ROAD HOLLYWOOD, EL 33021	
STREET ADDRESS	115 KENSINGTON-BLAD-		1.3 STREET ADDRESS	HALLINGED KL 32021	
CHY-S1 70	HOLLYWOOD FL 33021	DELETE	14 CFTY-ST-ZIP	Change Addition	
Tift f NAME		المال المال	22 NAME	Onarigo Acuto	
STREET ADDRESS			2.3 STREET ADDRESS		
CITY -ST-ZIP			2 4 CITY-ST-ZIP		
TITLE		DELETE	3.1 TITLE	☐ Change ☐ Addfil	
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CHY-ST-70P Title		DELETE	3.4 CITY-ST-ZIP 4.1 TITLE	☐ Change ☐ Additi	
NAME		L., OLLI IL	4.7 MLE		
STREET ADDRESS			4.3 STREET ADDRESS		
C-TY - ST - ZIP			4.4 CITY-ST-ZIP		
TITLE		DELETE	5.1 TITLE	Change Additi	
NAME			5 2 NAME		
\$TREET ADORESS			53 STREET ADDRESS		
CITY - ST - ZIP	,	- Novem	5.4 CITY - ST - ZIP	The Time	
TITLE	1	DELETE	6.1 TITLE	[_] Change _ L_ Additi	
NAME CONTRACTOR	}		6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	•	
14. 1 do here	L by certify that the information sub-	plied with this filing does not qua	1.f. for the august of as at-	sted in Section 119.07(3)(i), Florida Statutes. I further certify that the	
informatic Lam an d appears	on indicated on this annual report officer or director of the corpolatio in Block 12 or Block 13 if changes	or supplemental annual report is n or the receiver or trustee empo d, or on an attachritent with an ad	true and accurate and the swered to execute this reput the control of the control	hat my signature shall have the same legal effect as if made under oath; to port as required by Chapter 607, Florida Statutes; and that my name	

FILED

Apr 15 1997 8:00am

Secretary of State

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