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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1997 DOCUMENT # V02540

151

Principal Place of Business 18440 CARIBBEAN BOULEVARD MIAMI FL 33157	Mailing Address	18440 CARIBBEAN BOULEVARD						
			٠	-	3. Date Incorporated or Qualified 12/23/1991		ate of Las /08/199	
2. Pancipal Place of Business	2a. Mailing Address				4. FEI Number			Applied For
<u>al</u>	26				NOT APPLICABLE			Not Applicab
Suite, Apt. #, etc. 22	Suite, Apt. #, etc.				5. Certificate of Status Desired		~	5 Additional Required
City & State	City & State				Election Campaign Financing Trust Fund Contribution		\$5.0	May Be
Zip Country	Z _I p)	Count	ry		8. This corporation has liability fo			
25	29	30				Yes		1 6. (30.002.)
Name and Address of Cu	rrent Registered Agent			1	0. Name and Address of New F	legistered	Agent	
SCIACOVELLI, ANTHONY		6	1 Name					
18440 CARIBBEAN BLVD.		8	82 Street Addr		(P.O. Box Number is Not Accepta	able)		
MIAMI FL 33157		8	3				·····	
		<u> </u>	41 6:4:				100 7	
			4 City			FL	_ 1 1	ip Code
 Pursuant to the provisions of Sections 607, office or registered agent, or both, in the Siagent Tam familiar with, and accept the or 	itate of Florida. Such change wi bligations of, Section 607,0505,	atutes, the abc as authorized Florida Statut	by the cor es.	corpora poration's	tion submits this statement for the s board of directors. I hereby acc	ept the ap	pointment	as registered
SIGNATURE Street to the complete trace of my street. Street in the complete trace of my street.	stagentano lide if sprácable (I	atutes, the abo as authorized Florida Statut NOTE: Registered A				DATE	D DIRECT	ORS IN 12
SIGNATURE Street the complete trace of my street. 12. OFFICERS THEF D	st agent and litte if applicable (1	NOTE: Registered A 13. 1.1 TITLE	gent signature		han reinstating)	DATE		ORS IN 12
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