## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

annual REI <b>1996</b>	V.S.C. 7	Secretary of State DIVISION OF CORPORATIONS			
DOCUMENT		(8)			
FBK FINANCIA	AL CORP.			A IRON BINDI BENK BIRA NGAR MARA	I (GAL ALBIE ALBIE DIGIL BIBIL BIBE BIBE BIBE
Principal Place of Busine	\$S	Mailing Address			
11921 S. DIXIE HWY SUITE 202		11921 S. DIXIE HWY SUITE 202 MIAMI FL 33156			
MIAMI FL 33158		MIMMI PE 90190		3. Date incorporated or Qualified 01/06/1992	3a. Date of Last Report 03/03/1995
2. Principa Place of Bus	iness	2a. Mailing Address		4. FEI Number	Applied For
21	r	6		65-0331101	Not Applicable
Suite, Apt. #, etc.	-	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
Oty & State		City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
23] - 7p	Country	Zip	Country 30	B. This corporation has liability for     Florida Statutes	intancible tax under s 199.032,
o Nai	25 25 27 25 26 27 27 28 28 28 28 28 28 28 28 28 28 28 28 28			10. Name and Address of New I	Registered Agent
<b>3.</b>		Z	81 Name		
SHORE, H. ALL	AN		82 Street Add	ress (P.O. Box Number is Not Accepta	ble)
MUSEUM TOWE					
150 WEST FLAC			83		
MIAMI FL 33130			84 City		FL 85 Zip Code
or registered agent, familiar with, and ac	or both, in the State of Florida. Scept the obligations of, Section (	507,0505, Florida Statutes.	by the corporation's boa		urpose of changing its registered office pointment as registered agent. I am
12.	OFFICERS AND D		13.	ADDITIONS/CHANGES TO OF	FICERS AND DIRECTORS IN 12
THE D		[]] DELFTE	1. 1 TIFLE		Change Addition
	NK, FRANKLIN		1.2 NAME		
	1 S DIXIE HWY, #202		1.3 STREET ADDRESS		
. *** * * * * * * * * * * * * * * * * *	AI FL	[] DELETE	2.1 TIBLE		Change Addition
TULE D	HIS DADDV	Divition	2 2 NAME		
	ILIN, BARRY 21 S DIXIE HWY, #202		2 3 STREET ADDRESS		
	VII FL		24 CITY-ST-ZIP		
Tille D		DELFTE	3 1 THTLE		Change Addition
	ilin, kenneth		3.2 NAMÉ		
	21 S DIXIE HWY, #202		3.3 STREET ADORESS		
	MI FL		3.4.C+TY+S1+ZIP	- m-4-1	☐ Change ☐ Addition
INTE		DELETE	4 1 TITLE		Change Addition
NAM1			4.2 NAME		
STREET ADDRESS			4 3 STREET ADDRESS		
CTY ST-7P		DELETE	4.4 CITY - ST - ZIP 5 1 TITLE		Change Addition
li (F		Dettit	5 2 NAME		
NAME			53 STREET ADDRESS		
STRUET ADDITIONS			5.4 CITY - ST - ZIP		
CHY ST-7/P		DELETE	6 1 Tille		Change Addition
Luk		_ <del>-</del>	6.2 NAME		

6.3 STREET ADDRESS

6.4 CHTY - ST - ZIP

SIGNATURE:

STREET ADDRESS.

14. If do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). 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 certify that I am an officer or director of this 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 of changed, or on an attachment with an address.

22.96

Daytime Phone #