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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #

NATURES

97 MAY -2 AM !!: 14

SECRETARY OF STATE TALLAHASSEE FLORIDA

	ce of Business	Mailing Address		_	
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1,1	11 Fl 33175	LIVAN	11 F1 33175		
MIAP	A. A. 200.0	P-0(1-1		3. Date Incorporated or Qualified	3a, Date of Last Report
				01-08-1992	T WAT COURS OF LOSS (POPUL)
2. Principal f	Place of Business	2a. Mailing Address		4. FEI Number	Applied Fo
21		26		65-0329749	
Suite, Apt	t. W. etc.	Suite, Apt. #, etc	 }.		- \$9.75 Addition
22		27		5. Certificate of Status Desired	Fee Required
City & Stat	ite	City & State		8. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	☐ Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for in	
24	25	29	30		Yes No
	9. Name and Address of Currer	nt Registered Agent		10. Name and Address of New Rec	pistered Agent
1.50	A Americal A	<u> </u>	61 Name		
MES	a, maduel A	*	82 Street Addr	ess (P.O. Box Number is Not Acceptable	lá)
75 W	CELAGLER	ST PH	Aw Otroot Wildle	and the section is the northing	M.
\	<u>.</u>		83		
MIA	MI FL 331.	<i>30</i>			
		-	84 City		FL 65 Zip Code
11, Pursuant	to the provisions of Sections 607.050	02 and 607 1508, Florida S	Statutes, the above-named corp	poration submits this statement for the pa	urnose of changing its registe
office or	registered agent, or both, in the State	of Florida, Such change to the serious of Section 607,050	was authorized by the corporati	ion's board of directors. I hereby accep	t the appointment as registere
		ations of, froction box (poc	o, i iorida otatolog.	•	1
SIGNATURE	Signature, typed or printed name of registered ap-	eni and idle if i oplicable	(NOTE Registered Agent signature require	ed when reinsteling)	DATE
12.		ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	FRS AND DIRECTORS IN 12
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