FILE NOW: FILING FEE AFTER MAY 1 IS \$550 00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT

Sandra B. Mort an

Socretary of Stale:
DIVISION OF CORPOR ATIONS

1997

DOCUMENT # V08090

(5)

ESTHER VIRGINIA WARNER, INC.

FILED
Apr 25 1997 8:00am
Secretary of State

:						
Principal Place		Mailing Address		3 10931 911911 98191 19111 88118 18111 9811	Dinit nisit nisit dinit sinit dinit ibat	
1124 SW 2ND AVE POMPANO BCH FL 33080 US		1124 SW 2ND AVE POMPANO BCH FL 33060-8724 US				
			·-	3. Date incorporated or Qualified 01/21/1992	3a. Date of Last Report 02/29/1996	
2. Principal Pl	ace of Business	26 1124. S.W	and Ave	4. FEI Number 65-0309259	Applied For Not Applicable	
Suite, Apt.	#, etc.	Šuite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State 28 P C41 0 VM V	BIJACHE	t A 6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country	28 Poyspullo 29 33660-9724	Country	8. This corporation has liability for i	ntangible tax under s. 199.032, Yes \[\] No	
24	9. Name and Address of Current		3 0	10. Name and Address of New Re		
	RNER, ESTHER VIRGINIA	Tiogistorou Agont	81 Name	10. 144110 4114 7441000 01 11011 1101	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
11. Pursuant toffice or reagent. I as	NE 18TH AVE #302 AUDERDALE FL 33334-5151	of Florida. Such change was au	84 City s, the above-named of	Address (P.O. Box Number is Not Acceptable S. W. 2 w. A. C. F. C.	FL 85 Zip Code 33000 - 872	
SIGNATURE	Signature, typed or printed name of registered age:	if and fille if applicable (NCTE)	Registered Agent signature a	equired when reinstating)	DATE	
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12	
TITLE	D	☐ DELETE	1.1 TITLE	1124 S.W. INCH AV PEMPUNC BIRACH, 1	Hau Change Addition	
NAME	WARNER, ESTHER VIRGINIA		1.2 NAME	1129 3.00.000 110	121- 42	
STREET ADDRESS	309 SE10TH AVE #3		1.3 STREET ADDRESS	Numarine BRINGHI	=1 N. 33060 +872	
CITY-ST-ZIP	POMPANO BEACH FL 33060-7	373	1.4 CITY - ST - ZIP	130Mpore Politicity		
TITLE		☐ DELETE	2.1 TITLE		Change Addition	
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS			
CITY-ST-ZIP			2.4 CHY - ST - ZIP			
TITLE		☐ DELETE	3.1 TillE		Change Addition	
NAME			3.2 NAME			
STREET ADDRESS			3 3 STREET ADDRESS			
City-St-ZIP		DELETE	3 4. CITY - ST - ZIP		Change Addition	
TITLE		[Decent	4.1 TITLE 4.2 NAME		Unlange Addition	
STREET ADDRESS			4.3 STREET ADDRESS			
			4.4 CHTY-S1-ZIP			
CITY-ST-ZIP TITLE		DELETE	5.1 TITLE		Change Addition	
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY-ST-ZIP			
TITLE		DELETE	6.1 TITLE	**************************************	Change Addition	
NAME			6.2 NAME		• -	
STREET ADDRESS	!		G.3 STREET ADDRESS			
CITY-ST-ZIP			6.4 CITY-ST-ZIP			
and Calabracal	oy certify that the information supplied in indicated on this annual report or s fficer or director of the corporation or in Block 12 or Block 13 in changed, or	with this filing does not qualify upplemental annual report is tru the receiver or trustee empowe op an attachment with ay add	for the eventation of	aled in Soction 119.07(3)(i), Florida Statute that my signature shall have the samplega eport as required by Chapte 607, Florida S	il effect as if made under oath, the Statules; and that my name	