FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1007

	MENT # V09078 CONSORTIUM, INC.				
Principal Place of Business		Mailing Address			
3201 SE 11TH STREET POMPANO BEACH FL 33082		3201 SE 11TH STREET POMPANO BEACH FL 33062-6508			
				3. Date Incorporated or Qualified 01/24/1992	3a. Date of Last Report 04/29/1996
	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
Suite, Apt	# ato	Suite, Apt. #, etc.		65-0310577	Not Applicable \$8.75 Additional
22	#, CRA	27		5. Certificate of Status Desired	Fee Required
City & Stat	16	City & State		6. Election Campaign Financing	\$5.00 May Be
23 Zipi	Country	28	Country	Trust Fund Contribution 8. This corporation has liability for int	
24	25	29 3	¬ '		Yes Wo
-11	g. Name and Address of Curre			10. Name and Address of New Regi	
CAN	VANNI, RICHARD V.		81 Name		
	1 SE 11TH ST.		82 Street Addr	ess (P.O. Box Number is Not Acceptable	1
	MPANO BCH FL 33062		on our radio	out (1.0. box (tailib). It (tot) to to	′′
			83	,	
			84 City		85 Zip Code
			1 1 ""		FL
office or a agent 1 a SIGNATURE	registered agent, or both, in the Statem familiar with, and accept the oblig		thorized by the corporation Statules. Registered Agent eignature requir	oration submits this statement for the pu ion's board of directors. I hereby accept and when reinstating)	the appointment as registered
12.	· · · · · · · · · · · · · · · · · · ·	ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICE	
TIPLE	PD	☐ DELETE	1,1 TITLE		Change Addition
NAME	COOK, JAMES		1.2 NAME		
STREET ADDRESS	3201 S.E. 11TH STREET		1.3 STREET ADORESS		
CITY ST 72	POMPANO BEACH FL	DELETE	14 CITY - SY - ZIP 2 1 TITLE		Change Addition
TITLE	VD	L.J DELLIL	2.2 NAME		Fit cutules Fit verifies
AT ALL STORES	3201 S.E. 11TH STREET		2.3 STREET ADDRESS		
STREET ADDRESS CHY+ST-ZIP	POMPANO BEACH FL		2.4 CITY-ST-ZIP		
THE	1 AMILEIA AMIANI I	DELETE	3.1 TITLE	· · · · · · · · · · · · · · · · · · ·	Change Addition
NAME			3.2 NAME		
STREET ADORESS			3.3 STREET ADDRESS		
CH + S !- 7IP			3.4. CITY-ST-ZIP		
TPTLF		DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CHY-ST-ZIP		Dr. rvr	4.4 CITY-ST-ZIP		Obnoce Laddice
Tille		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME Davida appropriate			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CHY-ST-ZIP TITLE		DELETE	5.4 CITY-ST-ZIP 6.1 TITLE	The state of the s	☐ Change ☐ Addition
NAME			62 NAME		man account of the second seco
STREET ADDRESS			63 STREET ADDRESS		
STREET POROLOG	1				

14. If do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information in dealed on this annual period or stupplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the control of the receiver or trust empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 12 or on an attachment with an address.

SIGNATURE:

RICHARD V. CINAMI

FILED

May 08 1997 8:00am

Secretary of State