CORI ANNU	PROFIT PORATION AL REPORT	Sandra B Secretar	TMENT OF STATE  . Mortham y of State CORPORATIONS			
1. Corporation	MENT # V22757 (1	•				
Principal Place	of Business.	-				
. 41	151 N.W. 132nd S7	rreet	•			
	IAMI, FL. 33054		•	A Data leasurement of A william	160 500 00 00	Doord
	•			3. Date incorporated or Qualified 3/18/92	3a. Date of Last 5 5/1/9	•
	oe of Business	2a. Mailing Address	· · · · · · · · · · · · · · · · · · ·	4. FEI Number		Applied For
21		26	····	65-0309522		Not Applicad
Sulte, Apt. #	l, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	7	5 Additional Required
City & State		City & State	<del></del>	8. Election Campaign Financing	\$R (	00 May Be
23		28		Trust Fund Contribution	LJ Add	ed to Fees
Zio 24	Country	Zip 29 .	Country 30	This corporation has liability for Florida Statutes	Intangible tax under a	1 <b>99</b> .032
57	9. Name and Address of Current		30]	10. Name and Address of New F		
			81 Name	······································	<del></del>	<del></del>
	ORELLO, PAUL		62 Street Add	ress (P.O. Box Number is Not Acceptab	ile)	
4151 N.W. 132nd Street						
М	IAMI, FL. 33054					
•			84 City	:	FL  85   Z	3p Code
lamiliar with	n, and accept the obligations of, Sections, and accept the obligations of sections are secured agent a	on 807,0505, Florida Statutes. Ind the If applicable. (NOTE	Registered Agent algnature require		DATE	
12.	OFFICERS AND	DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFF	CERS AND DIRECTO	
NAME	P MORELLO, PAUL	, 🚨	1.2 NAME			
STREET ADDRESS	4151 N.W. 132nd St	reet	1.3 STREET ADDRESS			
CITY-ST-ZIP	- MIAMI, FL. 33054		1.4 CITY - ST - ZIP			
TITLE NAME	V/P	□ br[EIE	2.1 TITLE 2.2 NAME .		Change	Additio
STREET ADDRESS	MORELLO, GULC II	N	2.3 STREET ADDRESS			
CITY - ST - ZIP	4151 N.W. 132nd Street		2.4 CITY - ST - ZIP			
TITLE	MIAMI, FL. 33054	vc.LETE	3. 1 TITLE	•	Change	Additio
NAME			3.2 NAME	•		
STREET ADDRESS CITY - ST - ZIP			3.3. STREET ADDRESS 3.4 CITY+ST-ZIP			
TITLE		DELETE	4.1 TITLE	<del></del>	Change	Addition
NAME			4.2 NAME			
STREET ADDRESS	0		4.3 STREET ADDRESS			
DITLE		DELETE	4.4 CITY - ST - ZIP 5. 1 TITLE		Change	Additio
NAME		<b>_</b>	5.2 NAME			
STREET ADORESS			5.3 STREET ADDRESS	00000180 -05/03/960108	7280	÷
CITY-\$1-2IP		DELETE	5.4 CITY-ST-ZIP	-05/03/360108 ***200.00		<b>13.</b> A.
TITLE NAME		₩ Derrete	6. 1 TITLE 6.2 NAME	ምምያር ሀር <b>፣ ሀር</b>	Change	Reddition
STREET ADDRESS	,		6.3 STREET ADDRÉSS			MD.
CITY-ST-ZIP			64 CITY-ST-ZIP			5.1
14. I do hereby certify that I	certify that the information supplied with information indicated dn this angle	ith this filing is voluntarily furnish all report or supplymental annua	ned and does not qualify for the properties true and accurate the properties true and accurate the properties are the properties and accurate the properties are the	or the exemption stated in Section 119 ate and that my signature shall have the is report as required by Chapter 607, Fi	07(3)(k), Florida Statu same legal effect as i	ites. Hunther if made units