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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V25260

(3)

EDWARD M. KAY, P.A.

FILED Jan 17 1997 8:00am Secretary of State



| Principal Place of Business | | | Mailing Address | | | | £ 12-013 Orivitat innen brite sitzt estet mats diate beste nest debte diate bebet diate | | | |
|-------------------------------------|--------------------------------------|---|--------------------------|----------|-------|---|---|---------------------------------------|---------------------------|--------------|
| 633 SOUTHEAST 3RD AVENUE | | | 633 SOUTHEAST 3RD AVENUE | | | | | | | |
| SUITE 4F Ft. Lauderdale Fl 33301 | | Suite 4-F Ft. Lauderdale Fl 33301-3151 | | | | | | | | |
| TT. LAUDERUF | 15 15 00001 | 1 1- b | eneralismas II s 9000 | - VIVI | | | 3. Date Incorporated or Qualified 03/31/1992 | | Date of Last 2/07/1996 | |
| 2. Principal P | lace of Business | 2a. N | failing Address | | | | 4. FEI Number | | | Applied For |
| 21 | | 26 | | | | | 65-0321609 | | | Not Applicab |
| Suite, Apt. | #, etc | S | uite Apt. #, etc. | | | *************************************** | 5. Certificate of Status Desired | | \$8.75 | Additional |
| 22 | | 27 | | | | | 6. Certificate of Status Desired | سا | Fee I | Required |
| City & Stat | e | | City & State | | | | 6. Election Campaign Financing | _ | \$5.0 | May Be |
| 23 | | 28 | | | | | Trust Fund Contribution | [_] | Adde | d to Fees |
| Zip | Country | ├ ─┐ | 'ip | Coun | itry | | 8. This corporation has liability for | | | s. 199.032, |
| 24 | [25] | 29 | | 30 | | | Florida Statutes 10. Name and Address of New F | Yes | | |
| | 9. Name and Address of Curre | ent Register | reu Agent | | B1 | Name | 10. Name and Address of New F | editreit | Agent | |
| | IGHT, PAMELA D. | | | | - | Name | | | | |
| | S.E. THIRD AVENUE, #4F | | | [8 | B2 | Street Ad | dress (P.O. Box Number is Not Accept | ible) | | |
| FT. | LAUDERDALE FL 33321 | | | - | B3 | | | | | |
| | | | |]` | - | | | | | |
| | | | | 1 | 84 | City | | FI | 85 Zip | p Code |
| agent La SIGNATURE | m familiar with, and accept the obli | | | | | | quired when reinslating) | DATE | | |
| 12. | OFFICERS A | | | 13. | | | ADDITIONS/CHANGES TO OFF | CERS AN | D DIRECTO | RS IN 12 |
| TITLE | P | | DELETE | 1.1 T(TL | Æ | | | | Change | Additi |
| NAME | EWARD M. KAY | | | 1.2 NAN | Æ | | | | | |
| STREET ADDRESS | 200 S. OCEAN LANE | | | 1.3 STR | EET. | ADDRESS | | | | |
| CITY - ST - 74P | FT. LAUDERDALE FL | | | 1.4 CIT | Y - S | T-ZIP | | · · · · · · · · · · · · · · · · · · · | | |
| TITLE | | | ☐ DELETE | 2.1 TITE | .E | | | | Change | e [_] Additi |
| NAME | | | | 2.2 NAN | ME | | • | | | |
| STREET ADDRESS | | | • | 2.3 STR | EET | ADDRESS | | | | |
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| NAME | | | | 3.2 NAM | | | | | | |
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| TITLE | | | ☐ DELETE | 4.1 7171 | | | | | ☐ Change | Additi |
| NAME | | | | 4. 2 NAI | | I Proces | | | | |
| STREET ADORESS | | | | | | ADDRESS | | | | |
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| NAME | | | - NEVELLE | 5.2 NAM | | | | | ~ | |
| STREET ADDRESS | | | • | • | | ADORESS | | | | |
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| TITLE | | | DELETE | 6.1.7(1) | | ', * ', | | | ☐ Change | Additi |
| NAME | | | ing in the second | 100 | | 44 4 4 | | | | |
| STREET ADDRESS | | | | | | ADDRESS | | | | |
| CITY-ST-ZIP | | | | 6.4 CIT | | | | | | |
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14. Lido 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 indicated on this 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 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 13.11 changed, or on an attachment with an address.

SIGNATURE:

F SIGNING OFFICER OR DIRECTOR

1/9/97 954-764-0033 Date Davime Phone #