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

PROFIT CORPORATION ANNUAL REPORT

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED May 01 1998 8:00am Secretary of State

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	MENT # V263 5 R PUTNAM INC.	50	(1)					H 61811 1881
Principal Plac	e of Rusiness	Mailine	Address) CORN OLDH BYDI	
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11521 NW 33 SUNRISE FL 3			NW 33 ST. SE FL 33323			DO NOT WRITE IN THIS	SPACE	
						3. Date Incorporated or Qualified		
		- 			···	04/01/1992		
	Place of Business	├ ──¬	ling Address			4. FEI Number	1—1—·	pplied For
Suite, Apt.	# nic	26	le, Apt. #, etc.			65-0337656		ot Applicable Additional
22]	4 , 0,0.	27	io, ript. ir, oto.			5. Certificate of Status Desired		equired
City & State	e		& State			6. Election Campaign Financing	\$5.00	May Be
23	·····	28				Trust Fund Contribution		to Fees
Zıp Zıp	Zip Country		<u> </u>		ry	8. This corporation owes or has paid the cu		
24	25	29	d Ament	30		Personal Property Tax due June 30. 10. Name and Address of New Registered		No
Pla P	9, Name and Address of Curr	ANI HAĞIZIGIĞI	a wilder		1 Name	10. Name and Address of New Registered	- Agent	
	TNAM, ROGER 521 NW 33 ST.			Ĺ				
	NRISE FL 33323			8:	2 Street Add	dress (P.O. Box Number is Not Acceptable)		
-	WHOL I'L GOOLG			6:	3			
				8	4 0			
					4 City	FL	85 Zip	Code
		oligations of, Sec	ction 607.0505, F	Iorida Statute	9S.	ations board of directors. Thereby accept the ap	pointinont do	, 10gisto, 0a
SIGNATURE	Signature, typod or profed name of augistered	l agent and little if app	icable (NO	TE. Registered A		rporation submits this statement for the purpose of ation's board of directors. I hereby accept the apured when reinstating) DATE	`	
SIGNATURE	Signature, typod or profed name of registered OFFICERS A		licable (NO	TE. Registered A	geni signature req		D DIRECTOR	RS IN 12
SIGNATURE 12. TIFLE	Signature typod or product rame of impotered OFFICERS A	l agent and little if app	icable (NO	TE. Registered A	geni signature req	ured when reinstating) DATE		
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14. I 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 or suppliemental annual report is frue 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 if pranged, or on an attachment with an address.

SIGNATURE

THE CHAIR FOLL
