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



FILED Apr 21 1997 8:00am Secretary of State



COF A NNI	PROFIT RPORATION JAL REPORT	FEE AFTE	FLORIDA DEPAR Sandra B Secretar	RTMENT OF STATE Mortham BY OF STATE CORPORATIONS	Apr 21 1	LED 997 8:00a ary of State
SUNTRI	MENT # V285 JST FINANCIAL CORP	·	(6)			
Principal Place of Business Mailing Address 7771 W OAKLAND PARK BLVD #140 \$UNRISE FL 33351 SUNRISE FL 33351-6736						
: :		<u> </u>			3. Date Incorporated or Qualified 04/14/1992	3a. Date of Last Report 04/18/1996
	lace of Business	├ ──¬	Mailing Address		4. FEI Number 65-0325248	Applied Fo
Sulte, Apt.	#, etc.	26	Suite, Apt. #, etc.			Not Applies \$8.75 Additiona
22		27	0.2		5. Certificate of Status Desired	Fee Required
City & Stat	6	28	City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country		Zφ	Country	8. This corporation has liability for	intangible tax under s. 199.032
24	9. Name and Address of	Current Bordets		30	Florida Statutes 10. Name and Address of New Re	Yes No
STE SUN	1 W OAKLAND PARK BLVE 140 NRISE FL 33351 to the provisions of Sections 60 egistered agant or both, in the		7.1508, Florida Statute a. Such change was a	83 84 City	dress (P.O. Box Number is Not Acceptate a comparison of the parties of the partie	FL 85 Zip Code
11. Pursuant office or ragent. I a	140 NRISE FL 33351 to the provisions of Sections 66 egistered Joseph probable in the magnitude with Junio accept for the segment of the segm	07,0502 and 60 e State of logice o on gaylong/of, wood agons and Juli	applicable (NOTE	83 84 City as, the above-named could be corporated by the corporated Statutes. All CLU Registers Agent signature req	rporation submits this statement for the pation's board of directors. I hereby accept the patients of the pati	FL 85 Zip Code purpose of changing its registere the appointment as registere
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and nereby certify that the information supplied with this fling 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 supplemental 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 or changed, or on an attachment with an address.