FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARIMENT OF STATE Sandra B. Mortnami Secretary of State

	1990				i i			
DOCU 1. Corporatio	MENT # V30	274 (*	7)					
BLACI	k gold fittness, in							
Principal Place of Business Mailing Address				······································) 8 H 8 3 		
7710 S.W. 62ND AVE MIAMI FL 33143 US		7710 S.W. 62ND AVE MIAMI FL 33143						
		US			3. Date Incorporated or Qualified 04/17/1992		of Last F 8/11/19	
z. Principai Pi 1	face of Business	2a. Mailing Addre	rss		4. FEI Number		\longrightarrow	Applied For
Suite, Apt.	#, etc.	Suite, Apt. #,	etc.		65-0327918			Not Applicabl Additional
		27			5. Certificate of Status Desired		•	Required
— City & State ป	e	City & State			6. Election Campaign Financing	——————————————————————————————————————		O May Be
Z1p	Country	28			Trust Fund Contribution		Adde	d to Fees
]	25	Zip 29	Count:	ry	8. This corporation has liability for Florida Statutes	r intangible ta is □No	ix under s	199.032,
<u> </u>	9. Name and Address of t		30		10. Name and Address of New		Agent	
			8	1 Name				
BROWN, LEMUEL			8:	2 Street Addr	ress (P.O. Box Number is Not Accepta	phlo)		
	.W. 62ND AVE					usic;		
MIAMI F	FL 33143		83	3				
familiar wit	to the provisions of Sections 60 ed agont, or both, in the State of th, and accept the obligations o	7.0502 and 607.1508, Florida of Florida Such change was a f, Section 607.0505, Florida S	Statutes, the above	City named corpor poration's boar	ration submits this statement for the pi ird of directors. Thereby accept the api	FL impose of cha pointment as		D Code registered officil Lagent, Lam
familiar wit	th, and accept the obligations o	f, Section 607.0505, Florida S	Statutes, the above uthorized by the contatutes.	named corpor poration's boar	st what reasting	irpose of cha pointment as	inging its registered	egistered offic agent. I am
familiar wit	th, and accept the obligations o	, Section 607.0505, Florida S	Statutes, the above uthorized by the contactutes.	named corpor poration's boar	iru oi directors. I nereby accept the app	pare FICERS AND	inging its registered	egistered offic agent. I am
familiar wit SIGNATURE 2.	th, and accept the obligations of system. See a printed near of register OFFICER CV BROWN, LEMUEL	f, Section 607.0505, Florida S अयोग्न क्षण कर बेहा जो र RS AND DIRECTORS	Statutes, the above uthorized by the contactes.	named corpor poration's boar	st what reasting	pare FICERS AND	inging its registered	egistered offici agent. I am
familiar wit SIGNATURE	th, and accept the obligations of Payster OFFICEF CV BROWN, LEMUEL 7710 S.W. 62ND AVE	f, Section 607.0505, Florida S अयोग्न क्षण कर बेहा जो र RS AND DIRECTORS	Statutes, the above uthorized by the contact the statutes. (NOTE: Forgotized Agents and	named corpor poration's boar	st what reasting	pare FICERS AND	inging its registered	egistered offic agent. I am RS IN 12
familiar wit SIGNATURE 2. TILE AME TREET ADDRESS TY-ST-ZIP	th, and accept the obligations of system. See a printed near of register OFFICER CV BROWN, LEMUEL	f, Section 607.0505, Florida S ाज्योत काराव्य कार्यकृतिक र RS AND DIRECTORS	Statutes, the above uthorized by the containing the	-named corpor poration's board	st what reasting	pare FICERS AND	inging its registered	egistered offic agent. I am RS IN 12
familiar wit SIGNATURE 2. SILE AME IREET ADDRESS -TY-SI-ZIP TLE	th, and accept the obligations of Payster OFFICEF CV BROWN, LEMUEL 7710 S.W. 62ND AVE	f, Section 607.0505, Florida S अयोग्न क्षण कर बेहा जो र RS AND DIRECTORS	Statutes, the above uthorized by the contactures. NOTE Frombred Agrand Agran	named corpor poration's board signature required in the poration of the porati	st what reasting	urpose of cha pointment as DATE FICERS AND	inging its registered	egistered offic agent. I am
familiar wit IGNATURE 2. ILE AME IREET ADDRESS TY-SI-ZIP ILE AME	th, and accept the obligations of Payster OFFICEF CV BROWN, LEMUEL 7710 S.W. 62ND AVE	f, Section 607.0505, Florida S ाज्योत काराव्य कार्यकृतिक र RS AND DIRECTORS	Statutes, the above uthorized by the contactures. (NOTE Fragilities Age 13. [E 1.1 PILE 1.2 NAME 1.3 STREE 1.4 CITY- [E 2.1 TILE 2.2 NAME 2.2 NAME 2.2 NAME 2.3 NAME 3.3 N	named corpor poration's boar signature relations to the corporation of	st what reasting	urpose of cha pointment as DATE FICERS AND	DIRECTO Change	egistered offic agent, I am RS IN 12
familiar wit IGNATURE LE AME INEET ADDRESS LY-SI-ZIP ILE AME IREFI ADDRESS	th, and accept the obligations of Payster OFFICEF CV BROWN, LEMUEL 7710 S.W. 62ND AVE	f, Section 607.0505, Florida S ाज्योत काराव्य कार्यकृतिक र RS AND DIRECTORS	Statutes, the above uthorized by the contactures. (NATE Franchised Agricultures) 13. [E 1.1 FILE 12 NAME 13 STREE 14 City- 2 1 TILE 22 NAME 23 STREE 23 STREE 23 STREE	- named corpor poration's boar - ret signature requires ET ADDRESS - ST-ZIP - T ADDRESS -	st what reasting	urpose of cha pointment as DATE FICERS AND	DIRECTO Change	egistered offic agent. I am RS IN 12
familiar wit SIGNATURE 2. JULE AME IREET ADDRESS TY-SI-ZIP TUE AME IREET ADDRESS IN-SI-ZIP	th, and accept the obligations of Payster OFFICEF CV BROWN, LEMUEL 7710 S.W. 62ND AVE	f, Section 607.0505, Florida S ाज्योत काराव्य कार्यकृतिक र RS AND DIRECTORS	Statutes, the above uthorized by the contatutes. Interest Int	- named corpor poration's boar rt signature require ET ADDRESS ST. ZIP	st what reasting	priose of characteristics of cha	DIRECTO Change	egistered offic agent. I am IRS IN 12 Addition
familiar wit SIGNATURE	th, and accept the obligations of Payster OFFICEF CV BROWN, LEMUEL 7710 S.W. 62ND AVE	f, Section 607.0505, Florida S SAND DIRECTORS DELFT	Statutes, the above uthorized by the containing of the containing	- named corpor poration's boar rt signature require ET ADDRESS ST. ZIP	st what reasting	priose of characteristics of cha	DIRECTO Change	egistered offic agent. I am RS IN 12
familiar wit GIGNATURE 2. TILE AME HEET ADDRESS TY-ST-ZIP TLE AME HEET ADDRESS TY-ST-ZIP TLE AME HEET ADDRESS TY-ST-ZIP TLE AME AME AME	th, and accept the obligations of Payster OFFICEF CV BROWN, LEMUEL 7710 S.W. 62ND AVE	f, Section 607.0505, Florida S SAND DIRECTORS DELFT	Statutes, the above unthorized by the contactures. NOTE Feighted Age 13. 1	- named corpor poration's boar rt signature require ET ADDRESS ST. ZIP	st what reasting	priose of characteristics of cha	DIRECTO Change	egistered offic agent. I am RS IN 12 Addition
familiar wit GIGNATURE 2. ITLE AME HEET ADDRESS TY-SI-ZIP TLE AME HEET ADDRESS HY-SI-ZIP TLE AME HEET ADDRESS HY-SI-ZIP TLE AME HEET ADDRESS TY-SI-ZIP	th, and accept the obligations of Payster OFFICEF CV BROWN, LEMUEL 7710 S.W. 62ND AVE	f, Section 607.0505, Florida S SAND DIRECTORS DELFT	Statutes, the above unthorized by the contactures. NOTE Feighted Age 13. 1	- named corpor poration's boar entisignature receives a consistence of the consistence of	st what reasting	priose of characteristics of cha	DIRECTO Change	egistered offic agent. I am IRS IN 12 Addition
familiar wit GIGNATURE 2. TILE AME HEET ADDRESS LY-SI-ZIP TLE HEET ADDRESS LY-SI-ZIP LE LE LE LE LE LE LE LE LE L	th, and accept the obligations of Payster OFFICEF CV BROWN, LEMUEL 7710 S.W. 62ND AVE	f, Section 607.0505, Florida S SAND DIRECTORS DELFT	Statutes, the above uthorized by the contactures. (NOTE Fragelined Agreement Agreemen	- named corpor poration's boar entisignature receives a consistence of the consistence of	st what reasting	urpose of cha pointment as DATE FICERS AND	DIRECTO Change	egistered officiagent. I am RS IN 12 Addition Addition
familiar wit GIGNATURE 2. THE AME THEET ADDRESS TY-ST-ZIP THE THEET ADDRESS TY-ST-ZIP THE THEET ADDRESS TY-ST-ZIP THE THEET ADDRESS TY-ST-ZIP THEET ADDRESS	th, and accept the obligations of Payster OFFICEF CV BROWN, LEMUEL 7710 S.W. 62ND AVE	F. Section 607.0505, Florida S	Statutes, the above unthorized by the contatutes. Interpretation Inte	- named corpor poration's boar entisignature receives a consistence of the consistence of	st what reasting	urpose of cha pointment as DATE FICERS AND	DIRECTO Change Change	egistered office agent. I am RS IN 12 Addition Addition Addition
familiar wit IGNATURE 2. TLE AME IREET ADDRESS IY-SI-ZIP TLE INEET ADDRESS IY-SI-ZIP TLE IMME REET ADDRESS IY-SI-ZIP TLE IMME REET ADDRESS IY-SI-ZIP ILE IMME REET ADDRESS	th, and accept the obligations of Payster OFFICEF CV BROWN, LEMUEL 7710 S.W. 62ND AVE	F. Section 607.0505, Florida S	Statutes, the above uthorized by the contained 13. 14. 14. 14. 17. 2. 2. 3. 4. 2. 3. 4. 3. 5. 6. 7. 8. 9. 9. 10.	FLADDRESS STIZIP FLADDRESS STIZIP FLADDRESS STIZIP FLADDRESS	st what reasting	urpose of cha pointment as DATE FICERS AND	DIRECTO Change Change	egistered office agent. I am RS IN 12 Addition Addition Addition
familiar wit IGNATURE 2. THE AME IREET ADDRESS IY-SI-ZIP THE IXE IXE IXE IXE IXE IXE IXE I	th, and accept the obligations of Payster OFFICEF CV BROWN, LEMUEL 7710 S.W. 62ND AVE	F. Section 607.0505, Florida S SAND DIRECTORS DELET DELET	Statutes, the above uthorized by the contatutes. (NOTE Fegine of Agreement	FLADDRESS STIZIP FLADDRESS STIZIP FLADDRESS STIZIP FLADDRESS	st what reasting	priose of chapointment as	DIRECTO Change Change	egistered office agent. I am RS IN 12 Addition Addition Addition Addition
familiar wit DIGNATURE 2. THE AME THEET ADDRESS TY-ST-ZIP THE AME TREET ADDRESS TY-ST-ZIP THE MME TREET ADDRESS TY-ST-ZIP THE MME TREET ADDRESS TY-ST-ZIP THE MME TREET ADDRESS TY-ST-ZIP THE TY-ST-ZIP THE TY-ST-ZIP TY-ST-ZIP TY-ST-ZIP TY-ST-ZIP	th, and accept the obligations of Payster OFFICEF CV BROWN, LEMUEL 7710 S.W. 62ND AVE	F. Section 607.0505, Florida S	Statutes, the above uthorized by the contained 13. 14. 12. 14. 13. 14. 14. 17. 2. 14. 17. 2. 17. 18.	FLADDRESS STIZIP FLADDRESS STIZIP FLADDRESS STIZIP FLADDRESS	st what reasting	priose of chapointment as	DIRECTO Change Change	egistered office agent. I am RS IN 12 Addition Addition Addition
familiar wit DIGNATURE 2. THE AME THEET ADDRESS TY-SI-ZIP THE AME TREET ADDRESS TY-SI-ZIP THE THEET THE THEET THEET TY-SI-ZIP TY-SI-ZIP TY-SI-ZIP TY-SI-ZIP TY-SI-ZIP TY-SI-ZIP TY-SI-ZIP TY-SI-ZIP	th, and accept the obligations of Payster OFFICEF CV BROWN, LEMUEL 7710 S.W. 62ND AVE	F. Section 607.0505, Florida S SAND DIRECTORS DELET DELET	Statutes, the above uthorized by the contained 13. 14. 12. 14. 13. 14. 14. 17. 2. 14. 17. 2. 17. 18. 18. 19.	FLADDRESS ST-ZIP CADDRESS ST-ZIP CADDRESS ST-ZIP	st what reasting	priose of chapointment as	DIRECTO Change Change	egistered offic agent. I am RS IN 12 Addition Addition Addition Addition
familiar wit SIGNATURE 2. THE AME THEET ADDRESS TY-SI-ZIP THE AME TREET ADDRESS TY-SI-ZIP THE AME TREET ADDRESS TY-SI-ZIP THE AME	th, and accept the obligations of Payster OFFICEF CV BROWN, LEMUEL 7710 S.W. 62ND AVE	F. Section 607.0505, Florida S SAND DIRECTORS DELET DELET	Statutes, the above uthorized by the contained by the con	FLADDRESS ST-ZIP LADDRESS ST-ZIP LADDRESS ST-ZIP LADDRESS ST-ZIP LADDRESS	st what reasting	priose of chapointment as	DIRECTO Change Change	egistered office agent. Fam. RS IN 12 Addition Addition Addition Addition
familiar wit SIGNATURE 2. THE AME IFFET ADDRESS -TY-SI-ZIP THE AME IREFT ADDRESS ITY-SI-ZIP	th, and accept the obligations of Payster OFFICEF CV BROWN, LEMUEL 7710 S.W. 62ND AVE	F. Section 607.0505, Florida S SAND DIRECTORS DELET DELET	Statutes, the above unthorized by the contained by the contained 13.	FLADDRESS ST-ZIP LADDRESS ST-ZIP LADDRESS ST-ZIP LADDRESS ST-ZIP LADDRESS	st what reasting	Impose of chapointment as	DIRECTO Change Change Change	egistered office agent. I am RS IN 12 Addition Addition Addition Addition
familiar wit SIGNATURE 2. THE AME THEET ADDRESS TY-SI-ZIP THE AME TREET ADDRESS TY-SI-ZIP THE AME TY-SI-ZIP THE AME TY-SI-ZIP THE AME TY-SI-ZIP TY-SI-ZIP THE AME TY-SI-ZIP THE AME TY-SI-ZIP THE THE TY-SI-ZIP THE THE TY-SI-ZIP THE THE TY-SI-ZIP THE TY-SI-ZIP THE TY-SI-ZIP THE TY-SI-ZIP THE THE T	th, and accept the obligations of Payster OFFICEF CV BROWN, LEMUEL 7710 S.W. 62ND AVE	Section 607.0505, Florida S SECTION CONTROL S S	Statutes, the above uthorized by the contained by the con	FLADDRESS ST-ZIP LADDRESS ST-ZIP LADDRESS ST-ZIP LADDRESS ST-ZIP LADDRESS	st what reasting	Impose of chapointment as	DIRECTO Change Change	egistered office agent. I am RS IN 12 Addition Addition Addition Addition
II. Pursuant to or register familiar with or register familiar with sIGNATURE 2. III.E HAME HEET ADDRESS STY-ST-ZIP HEET ADDRESS HIY-ST-ZIP HEET ADDRESS HIY-ST-ZIP HEET ADDRESS HIY-ST-ZIP HEET ADDRESS HIY-ST-ZIP HEET ADDRESS HIT ST-ZIP HEET ADDRESS	th, and accept the obligations of Payster OFFICEF CV BROWN, LEMUEL 7710 S.W. 62ND AVE	Section 607.0505, Florida S SECTION CONTROL S S	Statutes, the above uthorized by the containing of the problem of Agricultures. (ACATE Fagintered Agricultures) 13.	FLADDRESS ST-ZIP LADDRESS ST-ZIP LADDRESS ST-ZIP LADDRESS ST-ZIP LADDRESS	st what reasting	Impose of chapointment as	DIRECTO Change Change Change	egistered offic agent. Fam. RS IN 12 Addition Addition Addition Addition

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 conformation 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 by if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE:

SIGNATURE AND TYPEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Feb 26 1996 30 663 4681