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PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE

ANNUAL REPORT 1996		Secretary of State  DIVISION OF CORPORATIONS							
DOCUN 1. Corporation	MENT #	V31885	(9)						
PB III,						\$   <b>                                   </b>	<b>1111 1111 111</b>	B(BA) B(BA)	
Principal Place	of Business		ailing Address						
9450 SW 11 MIAMI FL 33			9450 SW 112 ST MIAMI FL 33176						
US	••••		US			3. Date incorporated or Qualified 04/28/1992	3a. Date o	f Last Re	•
2. Principa' Pla 1	ace of Business	2a 26	. Mailing Address			4. FEI Number 65-0332845		A	pplied For lot Applicable
Suite, Apt. #	v. etc.	27	Suite, Apt. #, etc.			Certificate of Status Desired		\$8.75	Additional lequired
Orty & State	· · · · · · · · · · · · · · · · · · ·	28	City & State			6. Election Campaign Financing Trust Fund Contribution		\$5.00	May Be
Zip L	25	ountry 29	Zip	Country 30		This corporation has liability for in Florida Statutes Yes			
	9. Name and A	ddress of Current Regis	tered Agent			10. Name and Address of New Ro	egistered Aq	jent	
1 CLANIC	OTELEN O			81	Name				
	, steven G. W 112 street			82 5	Street Addr	ess (P.O. Box Number is Not Acceptabl	e)		
	-L 33176			83					
***********				84 (	Dity			a=1 %.	O. J.
					-		FL		Code
or registere	ed agent, or both, ii	n the State of Florida. Such	r change was authoriz	es, the above-nan red by the corpora	ned corpor ation's boar	ation submits this statement for the purp d of directors. Thereby accept the appo	oose of chang intment as re	ging its re aistered	igistered offici agent. Lam
SIGNATURE _	п, актассер, те с	nunced registered agent and title 1	opus, Florida Statutes	5. DTE: Registered Agent sig			DATE		
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ISTIMIA WID SIGNATURE ILLE ILLE I ADDRESS MIY-SI-ZIP ILLE ILLE I ADDRESS	D LEVINE, STE 9450 S.W. 1	nume of registered agent and title 13  OFFICERS AND DIRECTOR  VEN	USUS, FIORICA STATUTES arginatio (NC STORS	DTE REGISTERED Agent of 13. 1.1 Title 1.2 NAME 1.3 STREET ADI 1.4 CITY - ST - Z 2.1 TITLE 2.2 NAME 2.3 STREET ADI	preture required  DRESS  TIP  ORESS	d when reinstating)	CERS AND D	HECTOR Change	RS IN 12
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SIGNATURE  2.  ILLE AAME TREET ADDRESS ANY-SE-ZIP JULE AAME TREET ADDRESS TIY-SI-ZIP JULE AAME TREET ADDRESS TIY-SI-ZIP JULE AAME TREET ADDRESS TIY-SI-ZIP JULE TREET ADDRESS	D LEVINE, STE 9450 S.W. 1	nume of registered agent and title 13  OFFICERS AND DIRECTOR  VEN	OSUS, FIORIGA STATUTES  OFFICE TE  DELETE	13.  1. 1 Title 1.2 NAME 1.3 STREET ADI 1.4 CITY - ST - Z 2 TITLE 22 NAME 2.3 STREET ADI 24 CITY - ST - Z 3 TITLE 32 NAME 33 STREET ADI 34 CITY - ST - Z	DRESS DRESS DRESS DRESS	d when reinstating)	CERS AND E	OFFICE OFFI Change Change Change	RS IN 12 Addition Addition
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appears in Block 12 or Block 13 if change in on an attachment with an address. SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR USE OF DESCRIPTION OF DESCRIP

SIGNATURE: