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

PROFIT **CORPORATION ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # V35564

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FILED
May 13 1997 8:00am
Secretary of State

### Special Price of Business 2a, Mailing Activess 4, FL Names Applied For Oxy 24/1996 2. Principal Place of Business 2a, Mailing Activess 4, FL Names Applied For Oxy 24/1996 3. Suite, Apt. #, etc. Su	Principal Place 5890 RODMAN S HOLLYWOOD FL US	STREET	Mailing Addres P.O. BOX 2281 SUITE 405 HOLLYWOOD F								
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25	City & State		City & State)			6.	Election Campaign Financing		\$5.00	May Be
28	23		~ ```								
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11. Pursuant to the provisions of Sections 607 0502 and 607 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 607,0505, Florida Statutes. SIGNATURE Signature, byred or pretion name of requirement agent with six it distributes. OFFICERS AND DIRECTORS 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE OFFICER AND DIRECTORS IN 12. 11. TITLE CAPUTO, KAREN 22 NAME 12 NAME 12 NAME 12 NAME 12 NAME 22 NAME 23 SIREET ADDRESS CITY-ST-ZIP TITLE OFFICERS AND DIRECTORS IN 12. TITLE OFFICER AND TITLE OFFICER AND DIRECTORS IN 12. TITLE OFFICER AND TITLE Addition OFFICER SAND DIRECTORS IN 12. TITLE OFFICER AND TITLE OFFICER AND TITLE Addition OFFICER AND TITLE OFFICER AND	HOLL	YWOOD FL 33020					····	<u> </u>	· · · · · · · · · · · · · · · · · · ·		
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14. I do 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 supplemental annual report is true and accurate and that my signature shall have the same logal 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 changed, or on an attachment with an address.

CICNIATURE:

6.4 CITY - ST - ZIP

CITY-ST-ZIP