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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Jan 14 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # V39246

(6)

Principal Place of Business Mailing Address 4014 CHASE AVE 4014 CHASE AVE STE 205 MIAMI BEACH FL 33140 MIAMI BEACH FL 33140-3446											
US		US					3. Date Incorporated or Qualified 05/27/1992	3a. Dat	te of Last R 25/1996	eport	
2. Principal P	Place of Business	2a. Mailin	g Address				4. FEI Number	0172		plied For	\dashv
21		26					65-0333849			t Applicable	
Suite, Apt.	#, etc.		Suite, Apt. #, etc.				5. Certificate of Status Desired				
City & Stat	te	City &	State				6. Election Campaign Financing		\$5.00	<u> </u>	7
23		28		·	,		Trust Fund Contribution		Added I	,	
Z₁p	Countr	, <u> </u>		Count	try		8. This corporation has liability for			199.032,	
24	25 Name and Addre	29 ess of Current Registered A	Agent	30			Florida Statutes 10. Name and Address of New Re	X Yes			-
BAF	RCO, ROSE C.		.3	8	31 Na	ıme	10, 114110 4114	.,,	.30.77		1
	4 CHASE AVE				32 St	eet Addr	ess (P.O. Box Number is Not Accepta	h e l			4
	205										
MIA	MI BEACH FL 33140			. 8	33						
				ē	34 Ci	У		FL	85 Zip (Dode	-
11. Pursuant office or s agent. I a	to the provisions of Sec registered agent, or both am familiar with, and acc	tions 607.0502 and 607.1506 n, in the State of Florida. Suc cept the obligations of, Section	8, Florida Stati in change was on 607.0505, F	ites, the abo authorized Torida Statut	ove-na: by the tes	ned corp corporati	oration submits this statement for the on's board of directors. I hereby acce	purpose of pt the appo	changing it sintment as	s registered registered	
SIGNATURE											ı
SIGNATURE		e of registered agent and little 4 applicat	tie. (NC	OTE. Registered A			rd when reinstating)	DATE			_
12.		e of registered agent and title diapplical PFICERS AND DIRECTORS		TE. Registered A	Agent sig			DATE	DIRECTOR		106)
12. TITLE			ble (NC	13.	Agent sig E		rd when reinstating)	DATE		S IN 12	9
12.	P BARCO, ROSE C. 4245 PRAIRIE AVE	FFICERS AND DIRECTORS		13. 1.5 TITU	Agent sig E	ature require	rd when reinstating)	DATE	DIRECTOR		9
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I do hereby certify that the information supplied with this filling 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 of true that my name