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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT

Sandra B. Morths

Secretary of State
DIVISION OF CORPORA ONS

DIVISION

FILED Apr 09 1997 8:00am Secretary of State

Principal Place 4101 LAGUNA CORAL GABLE	ASSOCIATES, INC. ce of Business STREET	Mailing Address 4101 LAGUNA STREET CORAL GABLES FL 331	46-1408			
US		US	ļ	3. Date Incorporated or Qualified 09/23/1992	3a. Date of Last F 04/09/1996	Report
2. Principal P	lace of Business	2a. Mailing Address		4. FEI Number 65-0368969	IA	pplied For ot Applicable
Suite, Apt.	.#, etc.	Suite, Apt. #, etc.	······································	5. Certificate of Status Desired	\$8.75	Additional equired
City & Stat	le	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00	May Be
Z _i p	Country 25	Z(p)	Country 30	8. This corporation has liability for		······································
· · · · · · · · · · · · · · · · · · ·	9. Name and Address of Curr			10. Name and Address of New R		
	DISE, DONALD		81 Name	,		
	1 Laguna Street Ral Gables Fl 33146		82 Street	Address (P.O. Box Number is Not Accepta	able)	·
COI	TAL GADELS IL SOTTO		83			
			84 City		- 85 Zip	Code
			1 1 7		FL 181 27	
				·		
11. Pursuant office or r	to the provisions of Sections 607.00 registered agent, or both, in the Sta	502 and 607.1508, Florida Stattle of Florida, Such change wa	tutes, the above-named s authorized by the col	d corporation submits this statement for the reporation's board of directors. I hereby acce		ts registered registered
	to the provisions of Sections 607.0t registered agent, or both, in the Sta am familiar with, and accopt the obt	502 and 607.1508, Florida Stat ite of Florida. Such change wa igations of, Section 607.0505,	tutes, the above-named s authorized by the con Florida Statutes.	corporation submits this statement for the poration's board of directors. I hereby acceptation		ts registered registered
11. Pursuant office or r agent. La SIGNATURE	to the provisions of Sections 607.0 registered agent, or both, in the Sta am familiar with, and accept the oblination for the provision of the section of th		J J Lutes, the above-namer s authorized by the col Florida Statutes. OTE Registered Agent signatur			ts registered registered
	Signal to expend or proved harde of registered a	agent and title if applicable. (N			purpose of changing i ept the appointment as DATE	
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SIGNATURE 12. TITLE NAME	STATE A PARTIE OF THE PROPERTY	agent and title if applicable. (N	OTE Registered Agent signatur	e required when reinstating)	purpose of changing i ept the appointment as DATE	RS IN 12
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To note the certify that the information applies with this limit does not qualify in the base legal that the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee emperated to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if charged, or on an appear of the corporation of the c

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIREC

Daytime Phone ♥

0203669