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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

(0)

| 1. Corporation                           | MENT # <b>V712</b> 8  Ranne  ERS INTERNATIONAL TR | (-)   |  |   | BOBY BOBY BOBY BOOK BORY HAD            |
|--|---|---|--|---|---|
| Principal Place                          | of Business                                       | Ma∃ing Address  |  |   | OTOM DIRAM BURN GIRAM BURN 1990         |
| 270 SW 31ST ST<br>FT LAUDERDALE FL 33315 |   | 270 SW 31ST ST<br>FT LAUDERDALE FL 33315                                |  |   |   |
|  |   |   |  |   | ate of Last Report<br><b>08/01/1995</b> |
| 2. Principal Pla                         | ce of Business                                    | 2a. Mailing Address   |  | 4. FEI Number<br>65-0402412   | Applied For<br>Not Applicable           |
| Suite, Apt. #                            | , etc.  | Suite, Apt. #, etc.   |  |   | \$8.75 Additional                       |
| City & State                             |   | City & State  |  |   | Fee Required                            |
| 23                                       |   | 28  |  | 6. Election Campaign Financing  Trust Fund Contribution   | \$5.00 May Be<br>Added to Fees          |
| Zıp<br><b>24</b>                         | Country 25  | Ζφ<br><b>29</b>   | Country  | 8. This corporation has liability for intangible  |   |
|  | g. Name and Address of Curr                       |   | 30   | Florida Statutes Yes No  10. Name and Address of New Registere  | d Agent                                 |
|  |   |   | 81 Name  |   |   |
| MIGDALL, ALLAN                           |   |   | 82 Street Addr   | ess (P.O. Box Number is Not Acceptable)   |   |
| 270 SW 31ST ST<br>FT LAUDERDALE FL 33315 |   |   | 83   |   |   |
| ***************************************  | ENDALL IL 00010                                   |   |  |   |   |
|  |   |   | 84 City  | ation submits this statement for the purpose of c   | L 85 Zip Code                           |
| SIGNATURE                                | i, and accept the obligations of, so              | etta date rassicasis (bio   | E. Registered Agent signature responsi                     |   |   |
| 12.                                      | DPS OFFICERS A                                    | ND DIRECTORS  | 13.  | ADDITIONS/CHANGES TO OFFICERS AF  | ND DIRECTORS IN 12                      |
| NAME                                     | MIGDALL, ALLAN                                    |   | 1.2 NAME   |   | ☐ Quands ☐ Modition                     |
| STREET ADDRESS                           | 270 SW 31ST ST                                    |   | 1.3 STREET ADDRESS   |   |   |
| CITY-ST-ZIP<br>TITLE                     | FT LAUDERDALE FL                                  | F'i Delett  | 1.4 C/TY - ST - 2/P  | T. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.   |   |
| NAME                                     |   | DELETE  | 2 1 TOTEE<br>2 2 NAME                                      |   | Change Addition                         |
| STREET ADDRESS                           |   |   | 2.3 STREFT ADDRESS   |   |   |
| CITY+ST-ZIP                              |   |   | 2.4 CITY - S1 - ZiP  |   |   |
| TITLE                                    |   | ☐ DELETE  | 3 1 HITLE  |   | Change Addition                         |
| NAME<br>OFFICE APPROAGO                  |   |   | 3.2 NAME   |   |   |
| STREET ADDRESS<br>CITY-ST-ZIP            |   |   | 3.3 STREET ADDRESS   |   |   |
| TITLE                                    |   | DELETE  | 3.4 CHY ST-ZIP<br>4.1 THLE                                 |   | Change Addition                         |
| NAME                                     |   |   | 4.2 NAME   |   |   |
| STREET ADORESS                           |   |   | 4.3 STREET ADDRESS   |   |   |
| CITY-ST-2IP                              |   |   | 4.4 CH Y · ST · ZIF  |   |   |
| TITLE                                    |   | DELETE  | 5 1 70715  |   | Change Addition                         |
| NAME<br>STREET ADDRESS                   |   |   | 5.2 NAME   |   |   |
| STREET ADDRESS CITY-ST-ZIP               |   |   | 5.3 STREET ADORESS   |   |   |
| TITLE                                    |   | DECETE  | 5.4 CITY - S! - 7/P<br>6.1 TITLE                           |   | Change Addition                         |
| NAME                                     |   | <u> </u>  | 6.2 NAME   |   | The cuantities The Witchitter           |
| STREET ADDRESS                           |   |   | 6.3 STREET ADDRESS   |   |   |
| CITY-ST-ZIP                              |   |   | 6.4 CITY - S.L - ZIF                                       |   |   |
| oath; that I                             |   | nativreport or supplementa: annu<br>Poration or the receiver or trustee | al report is true and accurat<br>empowered to execute this | or the exemption stated in Section 119.07(3)(k), Fig. and that my signature shall have the same legs report as required by Chapter 607, Florida Stati |   |

SIGNATURE: CHICA WIGHE ATTAN MIGDALL PRES, 6/21/96 454-524-0200

CR2E034 (12/95)