NONPROFIT CORPORATION ANNUAL REPORT 1996			Secretary Division of Co		dra B Morth cretary of St OF CORPC	t OF STATE ham late					
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rincipal Place of Business Mailing Address  8001 COLONY CIRCLE N  8001 COLONY CIRCLE N											
AMARAC FL 33				RAC FL 3332						41 Dec	
IS			US				3. Date	e Incorporated or Qualified 10/16/1981	3a. Dat	e of Last Rep 04/21/19	95
Principal Place	o of Business		2a. Ma	iling Address			4. FEI	Number	<u> </u>		lied For
rnncipai riace	e or position		26					59-2778366		\$8.75 A	Applicable dditional
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	25	·	29		30	<del></del>	Flo 10 Na	rida Statutes me and Address of New Re	Yes egistered A	No Igent	
	9. Name and	Address of Current	Registere	d Agent		81 Name	10. 110				
FRED CH	HAKTOURA, P	RESIDENT				82 Street A	Address (P.O.	Box Number is Not Accepta	ble)		
8001 CO	LONY CIRCL	e North				83					
TAMARA	C FL 33068									B5 Zip C	`ode
						84 City			FL	. 1 - 1	
Pursuant to	the provisions	of Sections 617.0502	and 617.	1508, Florida	Statutes, th		corporation su	bmits this statement for the part of directors. The reby accepts	—— <del>—                                  </del>		sistarod
, Pursuant to office or reg agent. I am	the provisions ( gistered agent, ( familiar with, ar	of Sections 617.0502 or both, in the State of accept the obligat	and 617. of Florida tions of, Se	1508, Florida Such change ection 617.05	Statutes, the was author 03, Florida		corporation su oration's board	bmits this statement for the jd of directors. I hereby accept	—— <del>—                                  </del>		intarad
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I do hereby certify that the information supplied will this largest or supplemental annual report is true and accurate and that my signature shall have the same legitifurther 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 legitifurther certify that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida 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 617, Florida 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 617, Florida 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 617, Florida 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 617, Florida 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 617, Florida made under oath; that I am an officer or director of the corporation of the 954 - 722 - 5688 Date Daytime Phone # 0009400

SIGNATURE: