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

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Feb 05	1998	8:00am
Secre	tary c	of State

FILED

AININ	1998		Secretary of State DIVISION OF CORPORATIONS		Secretary of State	
 Corporation 	MENT # J on Name M. ROUTMAN, P	11794 .a.	(1)			
% LLOYD M. 100 NE 84TH MIAMI FL 33	1 ST		Mailing Address LLOYD M. ROUTMAN 100 NE 84TH ST MIAMI FL 33138		DO NOT WRITE IN THIS	SPACE
					3. Date Incorporated or Qualified	
- Drivet - 15	No (D - :		3 4 - 11		04/28/1986	
2. Principal P	Place of Business NE 90.		. Mailing Address		4. FEI Number 59-2699451	Applied For
Suite, Apt.		3/REE , 26	Suite, Apt #, etc.			Not Applicable \$8.75 Additional
22		27			5. Certificate of Status Desired	Fee Required
	11 SHOKES,		City & State		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zîp 24 33/	Counti		Zip	Country	8. This corporation owes or has paid the cu	
24 3,3/	9. Name and Addre			60	Personal Property Tax due June 30. 10. Name and Address of New Registered	X Yes No
P.O	OUTMAN, LLOYD M.	as of Content Hogis	stered Agent	81 Name	ID. Hame and Address of New Hegistered	Agent
	O NE 84TH ST			82 Street Addi	ress (P.O. Box Number is Not Acceptable)	
	AMI FL 33138			62 Street Addi	ress (F.O. Box Number is Not Acceptable)	İ
				83		
				84 City		85 Zip Code
					FL	- ' . '
11, Pursuant office or r	to the provisions of Sec registered agent, or both	tions 607.0502 and 6 i. In the State of Flori	607.1508, Florida Statutes ida. Such change was au	, the above-named corp thorized by the corporat	poration submits this statement for the purpose of the board of directors. I hereby accept the ap-	of changing its registered opintment as registered
agent, I a	m familiar with, and acc	ept the obligations of	f. Section 607.0505. Flori	da Statutes.		-
SIGNATURE	Signature, typed or printed name	o of registered mant and title	M applicable (NOTE)	Registered Agent signature requir	red when reinstating) DATE	
12.		FFICERS AND DIRE		13.	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12
TITLE	PD		DELETÉ	1.1 TITLE		☐ Change ☐ Addition ♀
NAME	ROUTMAN, LLOYI	O M.		1,2 NAME		2
STREET ADDRESS	100 NE 84TH ST			1.3 STREET ADDRESS		ايرا
CITY-ST-ZIP	MIAMI FL			1,4 CITY-ST-ZIP		
TITLE			☐ DELETE	2.1 TITLE		Change Addition
NAME				2.2 NAME		
STREET ADDRESS				2.3 STREET ADDRESS		
CITY-ST-ZIP TITLE			DELETE	2. 4 CITY-ST-ZIP 3.1 TITLE		Change Addition
NAME				3.2 NAME		
STREET ADDRESS				3.3 STREET ADDRESS		
CITY - ST - ZIP				3.4. CITY-ST-ZIP		
TITLE			DELETE	4.1 TITLE		Change Addition
NAME				4. 2 NAME		
STREET ADDRESS	1			4.3 STREET ADDRESS		
CITY - ST - ZIP			C postere	4.4 CITY-ST-ZIP		Change Addition
TITLE			DELETE	5.1 TITLE		Change Addition
NAME caneer apparen				5.2 NAME		
STREET ADDRESS				5.3 STREET ADDRESS 5.4 CITY-ST-ZIP		
CITY-ST-ZIP TITLE			☐ DELETE	61 TITLE		Change Addition
NAME				62 NAME		. – .
STREET ADDRESS				6 3 STREET ADDRESS		
CITY-ST-ZIP			~	6.4 CITY - ST - ZIP		
14. I hereby o	ertify that the information	n supplied with this t	iling does not qualify for t		Section 119.07(3)(i), Florida Statutes, I further co	ertify that the information

SIGNATURE:

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 ar officer or director of the corporation or the refereiver of tristee employered 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.

GNATURE: