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

PROFIT CORPORATION ANNUAL REPORT



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

1996

SIGNATURE:

DOCUME:NT # J44888

(2)

CAPITAL ABSTRACT AND TITLE OF CORAL SPRINGS, INC ORPORATED						
Principal Place	of Business	Mailing Address			LONGL CENT BYANT BYANT DYBYT BYANT BYBYN BYBYN BYRYN BYN BYRYN BYN BYRYN BYN BYRYN BYN BYRYN BYN	
10115 W SAMPLE ROAD SUITE 210 CORAL SPRINGS FL 33065		SUITE 210	10115 W SAMPLE ROAD SUITE 210 CORAL SPRINGS FL 33065			
US		US		 Date Incorporated or Qualified 12/03/1986 	3a. Date of Last Report 07/07/1995	
	ace of Business	2a. Mailing Address		4. FEI Number	Applied For	
Suite, Apt. i	# elc	Suite, Apt. #, etc.		59-2780789	Not Applicable	
2	,, 0.0.	27		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State		6. Election Campaign Financing	\$5.00 May 80	
7.0		28		Trust Fund Contribution	Added to Fees	
Ζφ i]	Country 25	Ζη: 29	Country 30		or intangible tax under s. 199.032, es 🏿 No	
<u>'L</u>	9. Name and Address of Curi			10. Name and Address of New		
			81 Name	PAUL D. MAND	x 7	
MAND	el, paul d.			idress (P.O. Box Number is Not Accepta		
3200 U	JNIVERSITY DR.			115 W. SAMPLE		
SUITE			83			
CORAL	. Springs fl 33065		84 City	<u></u>	as Zio Codo	
			" "" " C	INAL SPUMS oration submits this statement for the p	FL 85 Zip Code 5	
 Pursuant t 	a the provincions of Peakson CO7 OF			protion or house this states and for the m	woode of changing he societared office	
or register familiar wit	ed agent, or both, in the State of Fi th, and accept the obligations of Se	002 and 607.1508, Florida Statu orida. Such change was authori ection 507/05957 Florida Statute	ites, the above-named corp ized by the corporation's bo is.	pard of directors. I hereby accept the ap	oppointment as registered agent. I am	
	1 m	N. Man	ized by the corporation's bo is.	pard of directors. I hereby accept the ap	oppointment as registered agent. I am	
ignature _	Signature, typed or printed name of regestered as	gent and title if applicable. (N	ized by the corporation's bo is: IOTE: Registered Agent agreeture requ	pard of directors. I hereby accept the ap	DATE	
ignature _	Signature, typed or printed name of regestered as	ert and trie if application (N AND DIRECTORS	ized by the corporation's books. Oit: Registered Agent agreeture requ	pard of directors. I hereby accept the ap	DATE FICERS AND DIRECTORS IN 12	
or registers familiar with SIGNATURE	Signary Typed or printed name of registered as OFFICERS A	gent and title if applicable. (N	ized by the corporation's books. OTE: Registeres Agent agreature requirement of the corporation of the corp	pard of directors. I hereby accept the apparent when renstating: ADDITIONS/CHANGES TO OF	DATE FICERS AND DIRECTORS IN 12 Change	
IGNATURE _ 2. TLF AME	Signing Typed or printed name of registereo as	ert and the rapplication (NAND DIRECTORS)	ized by the corporation's books. OTE: Registeres Agent agreature requirement of the corporation of the corp	pard of directors. I hereby accept the apparent when renstating: ADDITIONS/CHANGES TO OF	DATE FICERS AND DIRECTORS IN 12 Change Addition	
SIGNATURE _ 2. ITLE AME *REEL ADORESS	OFFICERS A OPT MANDEL, PAUL D. 3200 UNIVERSITY DR #2 CORAL SPRINGS FL	ert and the rapplication (NAND DIRECTORS)	ized by the corporation's books. OTE: Registeres Agent agreature requirement of the corporation of the corp	pard of directors. I hereby accept the apparent when renstating: ADDITIONS/CHANGES TO OF	DATE FICERS AND DIRECTORS IN 12 Change	
EIGNATURE _	OFFICERS A OPT MANDEL, PAUL D. 3200 UNIVERSITY DR #2 CORAL SPRINGS FL. DSV	ert and the rapplication (NAND DIRECTORS)	ized by the corporation's books. OTE: Registeres Agent agreature requirement of the corporation of the corp	pard of directors. I hereby accept the apparent when renstating: ADDITIONS/CHANGES TO OF	DATE FICERS AND DIRECTORS IN 12 Change Addition	
SIGNATURE _ 2. ITLE AME *REEL ADDRESS ITY-ST-ZIP	Sign: Speed or printed name of registered as OFFICERS A DPT MANDEL, PAUL D. 3200 UNIVERSITY DR #2 CORAL SPRINGS FL. DSV PERKINS, DIANE M.	pert and trie if application. (NAND DIRECTORS DELETE	ized by the corporation's books. 13. 1 1 TITLE 12 NAME 1 3 STREET ADDRESS 1.4 CITY-ST-ZIP 2 1 TITLE 2 2 NAME	pard of directors. I hereby accept the apparent when renstating and additions/CHANGES TO OF ADDITIONS/CHANGES TO OF ADDITIONS ADDITIONS ADDITIONS AND ADDITI	DATE FICERS AND DIRECTORS IN 12 Charge Addition CARRON Change Addition	
Z. TLF AME TYPEET ADDRESS TIY-ST-ZIP TLF AME	OFFICERS A DPT MANDEL, PAUL D. 3200 UNIVERSITY DR #2 CORAL SPRINGS FL DSV PERKINS, DIANE M. 3200 UNIVERSITY DR #2	pert and trie if application. (NAND DIRECTORS DELETE	ized by the corporation's books. 13. 1 1 TITLE 12 NAME 1 3 STREET ADDRESS 1.4 CITY-ST-ZIP 2 1 TITLE 2 2 NAME	pard of directors. I hereby accept the apparent when renstating and additions/CHANGES TO OF ADDITIONS/CHANGES TO OF ADDITIONS ADDITIONS ADDITIONS AND ADDITI	DATE FICERS AND DIRECTORS IN 12 Charge Addition CARRON Change Addition	
IGNATURE _ 2. LIF MME PREET ADDRESS ITY-ST-ZIP LIF AME FREET ADDRESS TY-ST-ZIP	Sign: Speed or printed name of registered as OFFICERS A DPT MANDEL, PAUL D. 3200 UNIVERSITY DR #2 CORAL SPRINGS FL. DSV PERKINS, DIANE M.	pert and the Papphication. (N AND DIRECTORS DELETE 10 DELETE	ized by the corporation's books. 13. 1 1 TITLE 12 NAME 1 3 STREET ADDRESS 1.4 CITY-ST-ZIP 2 1 TITLE 2 2 NAME	pard of directors. I hereby accept the apparent when renstating and additions/CHANGES TO OF ADDITIONS/CHANGES TO OF ADDITIONS ADDITIONS ADDITIONS AND ADDITI	DATE FICERS AND DIRECTORS IN 12 Charge Addition CARRON Change Addition	
IGNATURE _ Z. TLE AME HEEF ADDRESS IY-SI-ZIP ILE AME HEFF ADDRESS IY-SI-ZIP ILE IY-SI-ZIP ILE	OFFICERS A DPT MANDEL, PAUL D. 3200 UNIVERSITY DR #2 CORAL SPRINGS FL DSV PERKINS, DIANE M. 3200 UNIVERSITY DR #2	pert and trie if application. (NAND DIRECTORS DELETE	ized by the corporation's books. OTE: Registeres Agent agreature requirement of the corporation of the corp	pard of directors. I hereby accept the apparent when renstating: ADDITIONS/CHANGES TO OF	DATE FICERS AND DIRECTORS IN 12 Charge Addition CARRON Change Addition	
IGNATURE _ Z. ILF MME HEEF ADDRESS IY - ST - ZIP ILF MME AME AME AFFT ADDRESS IY - ST - ZIP ILF MME MME	OFFICERS A DPT MANDEL, PAUL D. 3200 UNIVERSITY DR #2 CORAL SPRINGS FL DSV PERKINS, DIANE M. 3200 UNIVERSITY DR #2	pert and the Papphication. (N AND DIRECTORS DELETE 10 DELETE	ized by the corporation's books. OTE: Register & Agont signature requirements. 1 1 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP 2.1 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP 3 1 TITLE 32 NAME	pard of directors. I hereby accept the apparent when renstating and additions/CHANGES TO OF ADDITIONS/CHANGES TO OF ADDITIONS ADDITIONS ADDITIONS AND ADDITI	DATE FICERS AND DIRECTORS IN 12 Change Addition FI 33065 Change Addition	
IGNATURE _ Z. TLF MME HEET ADDRESS IY-ST-ZIP ILE MME HEFT ADDRESS IY-ST-ZIP ILE MME HEET ADDRESS HEET ADDRESS HEET ADDRESS	OFFICERS A DPT MANDEL, PAUL D. 3200 UNIVERSITY DR #2 CORAL SPRINGS FL DSV PERKINS, DIANE M. 3200 UNIVERSITY DR #2	pert and the Papphication. (N AND DIRECTORS DELETE 10 DELETE	Ized by the corporation's books. OTE: Register Agent agreeture requires. 1 1 TITLF 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP 2.1 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP 3 1 TITLE 32 NAME 3.3 STREET ADDRESS	pard of directors. I hereby accept the apparent when renstating and additions/CHANGES TO OF ADDITIONS/CHANGES TO OF ADDITIONS ADDITIONS ADDITIONS AND ADDITI	DATE FICERS AND DIRECTORS IN 12 Change Addition FI 33065 Change Addition	
Z. TLE AME THEEF ADDRESS TLY - ST - ZIP TLE AME THEEF ADDRESS TY - ST - ZIP TLE AME THEEF ADDRESS TY - ST - ZIP TLE THEEF ADDRESS TY - ST - ZIP TREET ADDRESS TY - ST - ZIP	OFFICERS A DPT MANDEL, PAUL D. 3200 UNIVERSITY DR #2 CORAL SPRINGS FL DSV PERKINS, DIANE M. 3200 UNIVERSITY DR #2	and this if application. IN AND DIRECTORS DELETE 10 DELETE 10 DELETE	IZECT DAY THE COMPOSITION'S DO IS. 13. 1 1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 22 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3 1 TITLE 32 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 3 1 TITLE 32 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	pard of directors. I hereby accept the apparent when renstating and additions/CHANGES TO OF ADDITIONS/CHANGES TO OF ADDITIONS ADDITIONS ADDITIONS AND ADDITI	DATE FICERS AND DIRECTORS IN 12 Charge Addition Change Addition Addition Change Addition Addition Change Addition	
Z. TLF AMME HREEF ADDRESS ITY-ST-ZIP TLE AMME TY-ST-ZIP TLE AMME THEEF ADDRESS TY-ST-ZIP TLE AMME THEEF ADDRESS TY-ST-ZIP TLE THEEF ADDRESS TY-ST-ZIP TLE THEEF ADDRESS TY-ST-ZIP TLE	OFFICERS A DPT MANDEL, PAUL D. 3200 UNIVERSITY DR #2 CORAL SPRINGS FL DSV PERKINS, DIANE M. 3200 UNIVERSITY DR #2	pert and the Papphication. (N AND DIRECTORS DELETE 10 DELETE	IZECT DY THE CORPORTION'S DO IS. 11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY-ST-ZIP 2.1 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP 3 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-ST-ZIP 4.1 TITLE	pard of directors. I hereby accept the apparent when renstating and additions/CHANGES TO OF ADDITIONS/CHANGES TO OF ADDITIONS ADDITIONS ADDITIONS AND ADDITI	DATE FICERS AND DIRECTORS IN 12 Change Addition FI 33065 Change Addition	
IGNATURE _ 2. ILF AMME AMME AMME ILF AMME ILF AMME IAFF1 ADDRESS ITY-ST-ZIP ILE AMME	OFFICERS A DPT MANDEL, PAUL D. 3200 UNIVERSITY DR #2 CORAL SPRINGS FL DSV PERKINS, DIANE M. 3200 UNIVERSITY DR #2	and this if application. IN AND DIRECTORS DELETE 10 DELETE 10 DELETE	IZECT DE THE COMPONITION'S DO ISS. 13. 1 1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 22 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3 1 TITLE 32 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME	pard of directors. I hereby accept the apparent when renstating and additions/CHANGES TO OF ADDITIONS/CHANGES TO OF ADDITIONS ADDITIONS ADDITIONS AND ADDITI	DATE FICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Addition Addition	
Z. ILF AMME PREEF ADDRESS ITY-ST-ZIP ILE AMME IREET ADDRESS ITY-ST-ZIP ILE IREET ADDRESS ITY-ST-ZIP ILE IREET ADDRESS	OFFICERS A DPT MANDEL, PAUL D. 3200 UNIVERSITY DR #2 CORAL SPRINGS FL DSV PERKINS, DIANE M. 3200 UNIVERSITY DR #2	and this if application. IN AND DIRECTORS DELETE 10 DELETE 10 DELETE	IZECT DY THE CORPORTION'S DO IS. 13. 1 1 TITLE 12 NAME 13 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP 3 1 TITLE 32 NAME 33. STREET ADDRESS 34 CITY-ST-ZIP 4.1 TITLE 42 NAME 43 STREET ADDRESS	pard of directors. I hereby accept the apparent when renstating and additions/CHANGES TO OF ADDITIONS/CHANGES TO OF ADDITIONS ADDITIONS ADDITIONS AND ADDITI	DATE FICERS AND DIRECTORS IN 12 Charge Addition Change Addition Addition Change Addition Addition Change Addition	
IGNATURE _ 2. ILF AME PREET ADDRESS ITY-ST-ZIP ILE AME AME FREET ADDRESS ITY-ST-ZIP ILE AME INFERT ADDRESS ITY-ST-ZIP ILE MRE INFERT ADDRESS ITY-ST-ZIP ILE MRE REET ADDRESS ITY-ST-ZIP ILE MRE REET ADDRESS ITY-ST-ZIP	OFFICERS A DPT MANDEL, PAUL D. 3200 UNIVERSITY DR #2 CORAL SPRINGS FL DSV PERKINS, DIANE M. 3200 UNIVERSITY DR #2	and this if application. IN AND DIRECTORS DELETE 10 DELETE 10 DELETE	IZECT DE THE COMPONITION'S DO ISS. 13. 1 1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 22 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3 1 TITLE 32 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME	pard of directors. I hereby accept the apparent when renstating and additions/CHANGES TO OF ADDITIONS/CHANGES TO OF ADDITIONS ADDITIONS ADDITIONS AND ADDITI	DATE FICERS AND DIRECTORS IN 12 Charge Addition Change Addition Addition Change Addition Addition Change Addition	
IGNATURE _ 2. ILF AME PREEF ADDRESS IY-SI-ZIP ILE AME PREEF ADDRESS IY-SI-ZIP ILE AME PREEF ADDRESS IY-SI-ZIP ILE MME PREEF ADDRESS IY-SI-ZIP ILE MME PREEF ADDRESS IY-SI-ZIP ILE MME PREEF ADDRESS	OFFICERS A DPT MANDEL, PAUL D. 3200 UNIVERSITY DR #2 CORAL SPRINGS FL DSV PERKINS, DIANE M. 3200 UNIVERSITY DR #2	pert and trie if application (NAND DIRECTORS DELETE 10 DELETE 10 DELETE	IZECT DY THE CORPORTION'S DO IS. 13. 1 1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 22 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	pard of directors. I hereby accept the apparent when renstating and additions/CHANGES TO OF ADDITIONS/CHANGES TO OF ADDITIONS ADDITIONS ADDITIONS AND ADDITI	DATE FICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition	
IGNATURE _ 2. ILF AME PREEF ADDRESS ITY-ST-ZIP ILE MME PREEF ADDRESS ITY-ST-ZIP ILE MME MME MME MME MME MME MME	OFFICERS A DPT MANDEL, PAUL D. 3200 UNIVERSITY DR #2 CORAL SPRINGS FL DSV PERKINS, DIANE M. 3200 UNIVERSITY DR #2	pert and trie if application (NAND DIRECTORS DELETE 10 DELETE 10 DELETE	IZECT DY THE CORPORATION'S DO IS. 13. 1 1 TITLE 12 NAME 13 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP 3 1 TITLE 32 NAME 33. STREET ADDRESS 34 CITY-ST-ZIP 4.1 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP 5 1 TITLE	pard of directors. I hereby accept the apparent when renstating and additions/CHANGES TO OF ADDITIONS/CHANGES TO OF ADDITIONS ADDITIONS ADDITIONS AND ADDITI	DATE FICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition	
PIGNATURE _ 2. ILLE AME PREEL ADDRESS ILLY - ST - ZIP ILLE AME IRLE T ADDRESS ILLY - ST - ZIP ILLE AME IRLE T ADDRESS ILLY - ST - ZIP ILLE AME IRLE T ADDRESS ILLY - ST - ZIP ILLE AME IRLE T ADDRESS ILLY - ST - ZIP ILLE AME IRLE T ADDRESS ILLY - ST - ZIP ILLE AME ILLE ILL	OFFICERS A DPT MANDEL, PAUL D. 3200 UNIVERSITY DR #2 CORAL SPRINGS FL DSV PERKINS, DIANE M. 3200 UNIVERSITY DR #2	Jert and trie if application. (NAND DIRECTORS DELETE 10 DELETE DELETE DELETE DELETE	IZECT DY THE CORPORATION'S DO IS. 13. 1 1 TITLE 12 NAME 13 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP 3 1 TITLE 32 NAME 33. STREET ADDRESS 34 CITY-ST-ZIP 4.1 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP 5 1 TITLE 52 NAME	pard of directors. I hereby accept the apparent when renstating and additions/CHANGES TO OF ADDITIONS/CHANGES TO OF ADDITIONS ADDITIONS ADDITIONS AND ADDITI	DATE FICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition	
PIGNATURE _ 2. ILLE AME PREEL ADDRESS ITY-ST-ZIP ILLE AME IRLET ADDRESS ITY-ST-ZIP ILLE ITY-ST-ZIP	OFFICERS A DPT MANDEL, PAUL D. 3200 UNIVERSITY DR #2 CORAL SPRINGS FL DSV PERKINS, DIANE M. 3200 UNIVERSITY DR #2	pert and trie if application (NAND DIRECTORS DELETE 10 DELETE 10 DELETE	IZECT DY THE COMPONION'S DOCES. 13. 1 1 TITLE 12 NAME 13 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 22 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS	pard of directors. I hereby accept the apparent when renstating and additions/CHANGES TO OF ADDITIONS/CHANGES TO OF ADDITIONS ADDITIONS ADDITIONS AND ADDITI	DATE FICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition	
SIGNATURE _ 2. JULE AME PREEL ADDRESS JULY - ST - ZIP JULE AME AME AME AME AME AME AME A	OFFICERS A DPT MANDEL, PAUL D. 3200 UNIVERSITY DR #2 CORAL SPRINGS FL DSV PERKINS, DIANE M. 3200 UNIVERSITY DR #2	Jert and trie if application. (NAND DIRECTORS DELETE 10 DELETE DELETE DELETE DELETE	IZECT DY THE CORPORATION'S DO 13. 1 1 TITLE 12 NAME 13 STREET ADDRESS 1.4 CITY-SI-ZIP 2 1 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-SI-ZIP 3 1 TITLE 32 NAME 33 STREET ADDRESS 34 CITY-SI-ZIP 4.1 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-SI-ZIP 5 1 TITLE 52 NAME 53 STREET ADDRESS 44 CITY-SI-ZIP	pard of directors. I hereby accept the apparent when renstating and additions/CHANGES TO OF ADDITIONS/CHANGES TO OF ADDITIONS ADDITIONS ADDITIONS AND ADDITI	DATE FICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Change Addition	
PIGNATURE _ 2. ILLE AME PREEL ADDRESS ITY - ST - ZIP TLE AME IRLET ADDRESS ITY - ST - ZIP TLE AME IRLET ADDRESS ITY - ST - ZIP TLE AME IRLET ADDRESS ITY - ST - ZIP TLE AME IRLET ADDRESS ITY - ST - ZIP TLE AME IRLET ADDRESS ITY - ST - ZIP TLE IRLET ADDRESS ITY - ST - ZIP TLET IRLET ADDRESS ITY - ST - ZIP TLET IRLET ADDRESS ITY - ST - ZIP TLET IRLET ADDRESS ITY - ST - ZIP	OFFICERS A DPT MANDEL, PAUL D. 3200 UNIVERSITY DR #2 CORAL SPRINGS FL DSV PERKINS, DIANE M. 3200 UNIVERSITY DR #2	Jert and trie if application. (NAND DIRECTORS DELETE 10 DELETE DELETE DELETE DELETE	IZECT DY THE CORPORATION'S DO 13. 1 1 TITLE 12 NAME 13 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 22 NAME 23 STREET ADDRESS 24 CITY-ST-ZIP 3.1 TITLE 32 NAME 33. STREET ADDRESS 34 CITY-ST-ZIP 4.1 TITLE 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP 5 1 TITLE 52 NAME 53 STREET ADDRESS 44 CITY-ST-ZIP 51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY-ST-ZIP 6.1 TITLE	pard of directors. I hereby accept the apparent when renstating and additions/CHANGES TO OF ADDITIONS/CHANGES TO OF ADDITIONS ADDITIONS ADDITIONS AND ADDITI	DATE FICERS AND DIRECTORS IN 12 Change Addition Change Addition Change Addition Change Addition Change Addition	

954-344-8420