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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT STATE Sandra B. Mortham

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May 13 1997 8:00am

Secretary of State

Secretary of State **DIVISION OF CORPORATIONS**

1997

DESIGI	MENT # N4896 N YOUR LIFE, INC.	51 (9)				
rincipal Plac	e of Business	Mailing Address		{ 1	IBF BOBIH BIBIK BIBIH BIBIH BI	PH MINE 1801
i41 W BOÇA	GLADE	8541 W BOCA GLADES				
UITE B	F4 80404	SUITE B	040			
OCA RATON I S	FL 33434	BOCA RATON FL 33434-4 US	042	3. Date Incorporated or Qualified 05/14/1992	3a. Date of Last R 05/01/19	eport 96
7	Place of Business	2a. Mailing Address	<u> </u>	4. FEI Number 65-0406062	A	plied For
Suite, Apt.	# 010	Suite, Apt. #, etc.			40 7E	t Applicabl
	II, 010.	27	ď	5. Certificate of Status Desired	7	Againonai equired
City & Stat	е	City & State	····	6. Election Campaign Financing	\$5.00	May Be
<u> </u>		28		Trust Fund Contribution	Added	to Fees
Zip T	Country	Zip	Country	8. This corporation has liability for li	ntangible tax under s Yes 🔲 No	. 199.032,
J	9. Name and Address of Currel	nt Registered Agent	[30]	Florida Statutes 10. Name and Address of New Reg		
_ 	B. 100110 DITO MAGNETO DI DOTTO	in hogistales Agent	81 Name	10. 110. 110	JIOINIOO AJOIL	
SUITE 3 BOCA RATON FL 33434 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statut office or registered agent, or both, in the State of Florida. Such change was a agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statut.		83 84 City stes, the above-named cor	rporation submits this statement for the p	FL 1 1	Code	
OHICE OF I	registered agent, or both, in the State					
	im ramiliar with, and accept the obing	pations of, Section 617,0503, F	lorida Statutes.	ation's board of directors. I hereby accep	и ше арропилен аз	registered
IGNATURE	Signature, typed or printed name of registered 40	ent and tille if applicable. (NC	TE: Registered Agent signature requ	uired when reinstating)	DATE	
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