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

PROFIT



FLORIDA DEPARTMENT OF STATE

CORPOR ANNUAL 199	REPORT	Secre	a B. Mortham ctary of State F CORPORATIONS			
OCUME Corporation Nam	NT # P940 0	00022633 (9)			
•	PHILIPS, P.A.					
opal Place of B	lusiness	Mailing Address			Adiat adam	i i i i i i i i i i i i i i i i i i i
11380 Prosperity Farms RD. Suite 204 Palm Beach Gardens Fl 33410		11360 PROSPERITY FARMS RD. SUITE 204 PALM BEACH GARDENS FL 33410				
				3. Date Incorporated or Qualified 03/23/1994	3a. Dat	e of Last Report 5/01/1995
		2a. Mailing Address		4. FEI Number	_L	Applied For
Principal Place of Business		2a. Mailing Address 26		65-0476668		Not Applicable \$8.75 Additional
Suite, Apt. #, et	tc.	Suite, Apt. #, etc.		5. Certificate of Status Desired		Fee Required
City & State		City & State		Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees
City & Otale		28	Country	8. This corporation has liability or		tax under s 199,032
Zip	Country 25	Ζφ 29	30	Florida Statutes Yes 10. Name and Address of New		Agent
	9. Name and Address of Cur	rent Registered Agent	81 N	P PL. /AC	2 ,	
Pursuant to to registered familiar with,	ageor or bottom his same	702 (nd 607.1508, Florida Si jorda Such change was aut iscuon 607.0505, Florida Sin	tutes.	rporation submits this statement for the p board of directors. I hereby accept the ap	Furpose of oppositionent	benefice to registered of
GNATURE SI	justice to plant a series teron	a pert and latter application	ROTE Brownson April Squarzen	ADDITIONS/CHANGES TO O	FLICERS A	ND DIRECTORS IN 12
2.	DPST	AND DIRECTORS DELEIE				Change Addit.or
ILE AME	PHILIPS BRIAN P	077 004	1.2 NAME 1.3 STREET ADORESS			
TREET ADDRESS	11380 PROSPERITY FAR PALM BEACH GARDENS	MS RD., STE. 204 FL 33410	14 City -St - ZiP			Change Additio
ITY-ST-ZIP	PALM DEACH CAME	☐ DELETE				
AME			2.2 NAME 2.3 STREET ADDRESS			
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:TLE		☐ DELE TI	E 3 1 TULE 3 2 NAME			
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TITLE		☐ DELE1	4 2 NAME			
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CITY - ST - ZIP		[7] DELE	4 4 CITY - ST - ZIF 5 - TITLE			Change Additi
TITLE			5.2 NAME			
NAME STREET ADDRESS			5.3 STHEEL ADDRESS	\$		
CITY-ST-ZIP		DELE	5 4 C(1 Y - ST - Z(P) TE 6 1 TITLE			Change Addit
TITLE			6.2 NAME			
STREET ADDRESS			63 STREET ADDRES			
CITY - ST-7IP		nation is valuate	arily furnished and does not c	qualify for the exemption stated in Section accurate and that my signature shall have	119.07(3)(e the same	k). Florida Statutes I furthe legal effect as if made und
certify tha	by certify that the information su	report or suppleme	or trustee empowered to exa	qualify for the exemption stated in Section accurate and that my signature shall hav cute this report as required by Chapter 60	7, Florida	Statutes, and that my name
nath: that	t Lam an officer or director of the in Block 12 or Block 3 if offan	J. o op an attachment with	an address.	0)	40-	1250455
CICNAT	TURE: //	/ Hese	Drian / /	hilips 4/26/96	-70	Dayte e Proces
SIGNA	BIGHTURE CND	TYPED OR PRINTED NAME OF SIGNI	NG OFFICER OR DIRECTOR	/ / /		0256389