PROFIT CORPORATION ANNUAL REPORT



SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

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

1996

## DOCUMENT # P94000072462 (2)

| CORPO   | rate buying service i   | NC.   |  |  |  |  |                             |                                       |   |
|---|---|---|--|--|--|--|-----------------------------|---------------------------------------|---|
| Principal Place of Business Mailing Address  3401 N. FEDERAL HWY., SUITE 216 BOCA RATON FL 33431 BOCA RATON FL 33431  |   |   |  |  |  |  | ED#11 10111 10              | )                                     | #JIII# 1131 J##J                                      |
|   |   |   |  |  |  |  |                             |                                       |   |
|   |   |   |  |  |  | Date Incorporated or Qualified     10/03/1994                                  |                             | te of Last Re<br>11/19/199            | 5   |
| 2. Principal Pla  | ce of Business  | 2a. Mating Address  |  |  |  | 4. FEI Number<br>65-0526173  |                             | } <del> </del> -                      | Applied For<br>Not Applicable                         |
| Suite, Apt. #   | etc   | Suite, Apt. #, etc.   |  |  |  |  |                             |                                       | Additional  |
| 2   | , 010.  | 27  |  |  |  | 5. Gertificate of Status Desired   |                             |                                       | Required  |
| City & State  |   | Oty & State   |  |  |  | 6. Election Campaign Financing   |                             | \$5.0                                 | May Be  |
| 3   |   | 28  |  |  |  | Trust Fund Contribution  |                             |                                       | to Fees   |
| Zip   | Country   | Z <sub>I</sub> ρ  | —¬   | ountry   |  | 8. This corporation has liability for  |                             | tax under s                           | 199.032,  |
| 4   | 25  | 29  | 30   |  |  | Florida Statutes Ye  | <i></i>                     | I A m t                               |   |
|   | 9. Name and Address of Curre  | ent Hegistered Agent  |  | 81   | Name   | 10. Name and Address of New  | negistered                  | Agent                                 |   |
|   |   |   |  |  |  |  |                             |                                       |   |
|   | RUSSELL   |   |  | 82   | Street Addr  | ress (P.O. Box Number is Not Accepta   | able)                       |                                       |   |
|   | FEDERAL HWY., SUITE 216   |   |  | 83   |  |  |                             |                                       | ······································                |
| BOCA KA   | ATON FL 33431   |   |  |  |  |  |                             | <del></del>                           |   |
|   |   |   |  | 84 0   | City   |  | FL                          | 85 Zı                                 | Code  |
| or registere  | ed agent, or both, in the State o' Hor  | rida. Suc'i change was autho  | orized by the  | oove nar<br>corpora  | med corpor<br>ation's boar                             | ation submits this statement for the part of directors. I hereby accept the ap | urpose of of<br>pointment a | nanging its r<br>is registered        | agent, I am   |
| or registere<br>familiar witt<br>SIGNATURE  | d agent, or both, in the State of Hor<br>h, and accept the obligations of, Sec<br>Synamic times or performance treatmentage   | rida. Suc'i change was autho<br>stion 607.0505, Florida Statu   | orized by the<br>ites<br>(NOT: Register  | e corpora  | ation's boar   | rd of directors. I hereby accept the ap  | pointment a                 | s registered                          | agent. ram  |
| or registere familiar with SIGNATURE  | ad agent, or both, in the State of Flor<br>h, and accept the obligations of, Sec<br>Synamic treation professional Communication<br>OFFICERS At  | rida. Suc'i change was autho<br>shon 607.0505, Florida Statu<br>আফারিক 'কুর্ট কার্ট<br>ND DIRECTORS                                   | (NOT: Register   | e corpora  | ation's boar   | rd of directors. I hereby accept the ap  | DATE                        | ID DIRECTO                            | agent. ram  |
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| or registere<br>familiar with<br>SIGNATURE  | ad agent, or both, in the State of Florin, and accept the obligations of, Sec<br>Signature upon to provide a conference lay-<br>OFFICERS AT<br>P<br>MADRIS, RUSSELL                         | nda, Such change was authorbure 607,0505, Florida Statu   | NOTE Register 13   | e corpora  | ation's boar   | rd of directors. I hereby accept the ap  | DATE                        | ID DIRECTO                            | RS IN 12  |
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