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PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

FILED May 12 1997 8:00am Secretary of State

DOCUMENT 1. Corporation Name	# P96000101542	(4)

City & State City & Country Co	
3. Date Incorporated or Qualified 2. Principal Place of Business 2. Mailing Address 2. Mailing Address 3. Date Incorporated or Qualified 12/17/1996 3. Date Incorporated or Qualified 4. Fell Number 5. Confidence of Status Desired \$5. Pellot Control \$5. Pel	Nikie iini indi
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Suite, Apt. #, etc. Suite, Apt. #, etc.	Applied For
City & State City & Country	Not Applicable
28 29 29 20 20 20 20 20 20	75 Additional e Required
Zip	00 May Be
By Name and Address of Current Registered Agent DUKE, BRYAN W ESO. 90 NORTH ANDREWS AVENUE STH FLOOR FORT LAUDERDALE FL 33309 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of change officer or registered agent, or both, in the State of Florida-Such offsthe was authorized by the corporation's board of directors. I hereby accept the appointment agent. I am familiar with, and accept the obligation of Sections 607.0505, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 14. ITIE DELETE 11. ITIE STILES, TERRY M 4400 NORTH ANDREWS AVENUE FORT LAUDERDALE FL 33309 14. CITY-SI-ZIP DELETE 21. ITIE STILES, TERRY M 4400 NORTH ANDREWS AVENUE FORT LAUDERDALE FL 33309 15. Lauderdale FL 33309 16. CITY-SI-ZIP DELETE 31. ITIE 32. NAME 32. NAME 32. NAME 32. NAME 32. NAME 33. SIRRET ADDRESS 34. CITY-SI-ZIP DELETE 31. TITLE 32. NAME 32. NAME 33. SIRRET ADDRESS 34. CITY-SI-ZIP DELETE 31. TITLE 32. NAME 33. SIRRET ADDRESS 34. CITY-SI-ZIP DELETE 31. TITLE 32. NAME 33. SIRRET ADDRESS 34. CITY-SI-ZIP 11. CITY-SI-ZIP 11. CITY-SI-ZIP 11. CITY-SI-ZIP 11. TITLE 32. NAME 33. SIRRET ADDRESS 34. CITY-SI-ZIP 11. CITY-SI-ZIP 11. TITLE 32. NAME 33. SIRRET ADDRESS 34. CITY-SI-ZIP 11. CITY-SI-ZIP 11. CITY-SI-ZIP 11. CITY-SI-ZIP 11. CITY-SI-ZIP 11. CITY-SI-ZIP 12. CITY-SI-ZIP 13. SIRRET ADDRESS 34. CITY-SI-ZIP 14. CITY-SI-ZIP 15. CITY-SI-ZIP 16. CITY-SI-ZIP 17. CITY-SI-ZIP 18. CITY-SI	ded to Fees
B. Name and Address of Current Registered Agent DUKE, BRYAN W ESO. 6400 NORTH ANDREWS AVENUE 5TH FLOOR FORT LAUDERDALE FL 33309 83 84 City FL 85 11. Pursuant to the provisions of Soctions 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of change of the natural are with and advected the obligations of Society 6070505, Florida Statutes. SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 14. OFFICERS AND DIRECTORS 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 16. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 17. Launerdale FL 33309 16. ORDITIONS/CHANGES TO OFFICERS AND DIRECTORS 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 29. ADDITIONS/CHANGES TO OFFICE	er s. 199.032,
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SIGNATURE Signature MP-2 or printed name of taggle ede agent and Title II applicable (NOTE Registered Agent signature required when reinstating) DATE	ng its registered t as registered
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14. I do hereby certify that the information supplied with this filing closs not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify information indicated on this annual report of supplemental and accurate and that my signature shall have the same legal effect as if mad an an officer or director of the corporation or the receiver of further annowant to execute this report as required by Chapter 607. Florida Statutes: and that	hat the

appears in Block 12 or Block 13 changed, or on an attachment with an address.

SIGNATURE: