## 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

DOCUN 1. Corporation	MENT # <b>F94</b> 0	00005609 (2 R, INC.	2)		
Principal Place of Business M. 450 NEWPRT CENTER DR. STE. 304 NEWPORT BEACH CA 92660		Mailing Address 450 NEWPRT CENTI STE. 304 NEWPORT BEACH (	•		
				3. Date Incorporated or Qualified 10/28/1994	3a. Date of Last Report 11/27/1995
2. Pencipal Pla 21	ne of Business	2a. Mailing Address 26		4. FEI Number 75-2563228	Applied For Not Applicable
Suite, Apt. #	, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State		City & State		& Etastian Compaign Financing	Fee Required
23		28		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for inl	
24	25	29	30	Florida Statutes  Yes	
	9. Name and Address of Cu	rrent Registered Agent		10. Name and Address of New Re	gistered Agent
C T CO	RPORATION SYSTEM		81 Name 82 Street Ad	ddress (P.O. Box Number is Not Acceptable	3
1200 S. PINE ISLAND RD.				ocress (r.o. box number is not Acceptable	, 
PLANTA	TION FL 33324		83		
			<b>84</b> City		B5 Zip Code
11 Pursuant to	the provisions of Sections 607.0	1502 and 607 1608. Florida Stati	ttes, the above period cor	poration submits this statement for the purp	FL   Lip cook
familiar with SIGNATURE	n, and accept the obligations of, S Sput in good orphilations of registers	Section 607.0505, Florida Statuti	9S.  NOTE: Registered Agent signature req	oard of directors. I hereby accept the appoint uned when renstating)  ADDITIONS/CHANGES TO OFFICE	DATE
THE E	P	☐ DELETE	1 1 TITLE		Change Addition
NAME STREET ACORESS OF YEST ZIP	CHASE, MICHAEL R 450 NEWPORT CENTER NEWPORT BEACH CA 92		1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP		
W.F	EVP	DELETE	2 1 TITLE		☐ Change ☐ Addition
NAMI STRATTADURESS CHY-ST-ZIP	BENEDICT, COLEMAN J 450 NEWPORT CENTER NEWPORT BEACH CA 9:		2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP		
11/uf	EVCF	DELETE	3 1 TITLE		Change Addition
NAME	HOOVER, TED L		3.2 NAME		<del></del>
STREET ACCRESS	450 NEWPORT CENTER		3.3 STREET ADDRESS		
City-St-2iF	NEWPORT BEACH CA 9	Acres to Make a comment of the comme	3 4 CITY - S1 - ZIP		
TIFLE	VP	☐ DEFE1E	4. 1 TITLE		Change Addition
NAME	NEIDICH, DANIEL M	DD OTE OOL	4.2 NAME		
STREET ADDRESS	450 NEWPORT CENTER NEWPORT BEACH CA 93		4.3 STREET ADDRESS		
CHY-ST-ZiP	VPS	2000	4.4 CITY - ST - ZIP	1 P. Lowinsten + Hist. So.	Change Addition
THLE NAME	HAMAMOTO, DAVID T	( PL DETER	5 1 THILE 5 2 NAME	OF THE PROPERTY SE	CACETACAL CHANGE TAL MODITION
STREET ADDRESS	450 NEWPORT CENTER	DR., \$TE, 304	5 3 STREET ADDRESS	Edward I. Di Ovio	- , CO and
CUTY - ST - ZIF	NEWPORT BEACH CA 9	,	5 4 CITY-ST-2IP	750 NEWPORT CANDUL DR	WICH I SEE SUT
TILLE	VP	☐ DELETE	6 1 TITLE	Newford Beach, CA.	Change Addition
NAME	WILLIAMS, TODD A		6.2 NAME	ı	
STREET ADDRESS	450 NEWPORT CENTER		6.3 STREET ADDRESS		
CITY ST-ZIF	NEWPORT BEACH CA 9		6 4 CITY - ST - ZIP		
14. I do hereby	certify that the information suppl	ied with this filing is voluntarily fu	imished and does not quali	y for the exemption stated in Section 119.0	7(3)(k), Florida Statutes. I further