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NONPROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT # N9200000074 (6)

3406 NORTH ROOSEVELT BOULEVARD CORPORATION

306 WEST ROOSEVELT BOLLEVARD SUITE 201 SUITE 201 SUITE 201 KEY WEST FL 3000 US 3 Date Incorporated or Quiliford 10/30/1992 4 PER Lambor 5 Date Incorporated or Quiliford 10/30/1992 3 Date Incorporated or Quiliford 10/30/1992 4 PER Lambor 5 Date Incorporated or Quiliford 10/30/1992 4 PER Lambor 5 Date Incorporated or Quiliford 10/30/1992 4 PER Lambor 5 Date Incorporated or Quiliford 10/30/1992 4 PER Lambor 5 Date Incorporated or Quiliford 10/30/1992 5 Date In]			
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2. Principal Place of Business 2. A Nating Activess 2. Such April 8, etc. 3. Such April	00		03				01/26/1	1995	
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9. Name and Address of Current Registered Agent 9. Name and Address of Current Registered Agent HUTTON, SUZANNE A. 310 FLEMING STREET ROOM 29 KEY WEST FL 33040 11. Parsant to the producing of Sections 617 (PCC) and 617 1500, Florida Statutes, the above named corporation's submits this statement for the purpose of Family Registered Agent. I am for the producing of Sections 617 (PCC) and 617 1500, Florida Statutes, the above named corporation's submits this statement for the purpose of Family Registered Agent. I am for the producing of Sections 617 (PCC) and 617 1500, Florida Statutes, the above named corporation's submits this statement for the purpose of Family Registered Agent. I am for submits a registered Agent. I am for the purpose of Family Registered	Zip	Country		Country					
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HUTTON, SUZANNE A. 310 FLEMING STREET ROOM 29 KEY WEST FL 33040 11. Pursuant to the provisions of Sections 617 0502 and 617,1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its negistered agent, or both, in the State of Florids. Such change was authorized by the corporation's board of directors. I hereby accept the configuration of the purpose of changing its negistered agent. I am furnish with, and accept the cologisteriors of Sections 617 0502, Florida Statutes, the above named corporation submits this statement for the purpose of changing its negistered agent. I am furnish with, and accept the cologisteriors of Section 617 0502, Florida Statutes, the above named corporation's board of directors. I hereby accept the opporational agent, or both, in the State of Florida, Florida Statutes, the above named corporation submits this statement for the purpose of changing its negistered agent. I am furnish with a accept the origistered agent. I am furnish with a complete of the appointment as registered agent. I am furnish with a complete of the appointment as registered agent. I am furnish with a complete of the appointment as registered agent. I am furnish with a complete of the appointment as registered agent. I am furnish with a complete of the appointment as registered agent. I am furnish with a complete of the appointment as registered agent. I am furnish with a complete of the appointment as registered agent. I am furnish with a complete of the appointment as registered agent. I am furnish with a complete of the appointment as registered agent. I am furnish with a complete of the appointment as registered agent. I am furnish with a complete of the appointment as registered agent. I am furnish with a complete of the appointment as a registered agent. I am furnish with a complete of the appointment as a registered agent. I am furnish with a complete of the appointment and adent and accept the appointment as a registered agent. I am furnish with a complete of		9. Name and Address of Curr	ent Registered Agent			10. Name and Address of New Re	gistered Agent		
310 FLEMING STREET ROOM 29 KEY WEST FL 33040 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above named corporation submits this statement for the purpose of dranging its registered office or registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of dranging its registered agent. I am an advocet the colligiations of Sociolom 617.0503, Florida Statutes. 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes. 12. Craim and accept the colligiations of Sociolom 617.0503, Florida Statutes. 13. The corporation's board of dractions. I hereby accept the appointment as registered agent. I am an an accept the colligiations of Sociolom 617.0503, Florida Statutes. 13. The corporation's board of dractions. I hereby accept the appointment as registered agent. I am an accept the colligiations of Sociolom 617.0503, Florida Statutes. 14. Lot Y ST Price To the price remained agent at the appointment as registered office agent. I am an accept the colligiations of Sociolom 617.0503, Florida Statutes. 14. Lot Y ST Price To the price remained agent at the appointment as registered office. 15. The corporation's board of dractions. I hereby accept the appointment as registered office. 16. Lot Y ST Price To the price remained agent. I am accept the price registered agent. I am accept the provision of the appointment as registered office. 16. Lot Y ST Price To the price remained agent. I am accept the price registered agent. I am accept the price registered agent. I am accept the price registered office. 16. Lot Y ST Price To the price registered office. 17. Lot Y ST Price To the price remained agent. I am accept the price registered office. 18. Lot Y ST Price To the price remained agent and the section of the price registered office. 18. Lot Y ST Price To the price remained agent and the price remained agent. I am accept the price remained agent. I am accept the price remained agent. I am accept the price				81	Name				
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REY WEST FL 33040 84				00					
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SPIEGEL, HERBERT MM82 OVERSEAS HWY SILY-ST-ZIP SLAMORADA FL 14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the extension stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report or suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under	CITY-ST-ZIP		·	5 4 CITY-S	r-ZiP				
14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under	TITLE	-	DELETE	6 1 TITLE	Z	-		Addition	
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oath; that I am an officer or director of the corporation of the receiver or trustee empowered to execute this report as required by Chanter 617. Florida Statutes, and that my name	certify that	at the information indicated on this ani	nual report or supplemental ann	iual report is tru	e and accur	rate and that my signature shall have the s	ame legal effect as if	f made under	
appears in Block 12 or Block 13 Valanged, or on an attachment with an address.	oath; that appears i	t Lam an officer or director of the corp n Block 12 or Block 13 I chanced for	poration of the receiver or truste on an attachment with an add	e empowered t	o execute th	his report as required by Chapter 617, Flo	rida Statutes; and the	at my name	

SIGNATURE:

MULLIAND SILLAN MICHAEL B. INGRAM 19 JAN-196 2.

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