FILI	E NOW: FI	LING FEE A	FTER MAY 1	IS \$225.00			
	PROFIT	67 6 X	FLORIDA DEF	PARTMENT OF STATE			
	rporation Jal report		†(5)	ra B. Mortham			
	1996		•/	etary of State DF CORPORATIONS			
		L03836		· · · · · · · · · · · · · · · · · · ·			
DOCUI 1. Corporation	MENT #	1191 IN	,				
•		1191 6 1	suport Center	Drive			
		A 100	1				
Deertield Seach FL 33442-7708							
					,		
191 E Newport Center Drive			c/o ZAY MANAGEMENT, INC 1191 E. Neupockenter Dr. Suite, 1071		-		
£1. 1077			Suite 107		3. Date Incorporated or Qualified	3a. Date of	Last Report
Deer	field Beach	FL 33442	DeerheldBach A 334V2		7/20/1989		
2. Principal Pla 21	ace of Business		28. Mailing Address		4. FEI Number 650148093		Applied For
Suite, Apt.	#, etc.		Suite, Apt. #, etc.				Not Applicable 8.75 Additional
22			27		5. Certificate of Status Desired		Fee Required
City & State	9		City & State		Election Campaign Financing Trust Fund Contribution	[]	\$5.00 May Be
Zip		ountry	Zip	Country	8. This corporation has liability for	intangible tax u	Added to Fees nder s 199.032,
24	25 25	ddroop of Current	29	30		[]No	
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name							
Young, James L. 82 Street Address (P.O. Box Number is Not Acceptable)							
1191 E Newport Center Orive							
3017	E 107	1	444	83			
Dear	tield Bea	ch, FL 33	448	84 City		FL	5 Zip Code
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 changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am							
iarmilar wii	th, and accept the	obligations of, Section	607.0505, Florida Statute	JAMES L. YOUNG		4/22	
SIGNATURE	Sterature typed or printer	Inelne of registered age and	I tille if applicace (f	NOTE: Registered Agent signature required		DATE	
12. TITLE	T	OFFICERS AND I	DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFF		
NAME	D/P/5			1 1 TITLE I 12 NAME		ר) נ	hange Addition 2
STREET ADDRESS	Young	TAMES L. rewport Cente Beach FL	Br.	13 STREET ADDRESS			E03
CITY-ST-ZIP TITLE	Dearfield	Beach FL	33442	1 4 CITY - ST - 7 IP			
NAME	20/1/5	- 40	[] betelf	2 1 TITLE 2.2 NAME			hange Addition
STREET ADDRESS	JOHNE N	BUSON FOR	3344 5	2.3 STHEET ADDRESS			
CITY-ST-ZIP	Dearfield	Beach, FL		2.4 CrTY-ST-ZiP			
TITLE NAME			☐ DELETE.	3. 1 TITLE 3.2 NAME 4			hange Addition
STREET ADDRESS				3.3. STREET ADDRESS			
CITY-ST-ZIP				3.4 CITY - ST - ZIP			
TITLE NAME			☐ DELETE	4. 1 YITLE 4.2 NAME	•	ુ જા છે. ુ	hange Addition
STREET ADDRESS				4.3 STREET ADDRESS	り	(30/4/V	
CMY-ST-ZIP			——————————————————————————————————————	4.4 C(TY - ST - ZIP		, M	
TITLE NAME			DETEIT	5. 1 TAILE		-	hange
STREET ADDRESS				5.2 NAME 5.3 STREET ADDRESS	4000018 1 -05/07/96010	10784	4
CITY-ST-ZIP				5.4 CITY - \$7 - ZIP	***200.00		
TITLE			DELETE	6. 1 TITLE		□ c	hange 🔲 Addition
NAME STREET ADDRESS				6.2 NAME 6.3 STREET ADDRESS			
CITY-ST-ZIP				6.4 CITY - ST - ZIP			
ceruiy inat	. The information inc	icated on this annual.	recort or suchlemental an	mished and does not qualify for	or the exemption stated in Section 119. The and that my signature shall have the	camo logal offo.	ot an if made under
oath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.							

SAMES L. YOUNG

SAMES
SAMES
MONATURE AND TYPED ON PRINCED NAME OF SIDURING OFFICER OF DIRECTOR

SIGNATURE: