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Mailing Address

NONPROFIT CORPORATION \* ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

Principal Place of Business

DOCUMENT # N95000000519 (7)

9900 WEST CORPORATION, INC.

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	BAY HARBOR DRIVE R ISLAND FL 33154			AY HARBOR DRIVE				
Office Control			DATE TRAILECT	100000		Date Incorporated or Qualified	3a. Date of La	ant Dancet
						02/02/1995	38. Date of La	ast neport
2. Principal Pla	ace of Business	· · · · · · · · · · · · · · · · · · ·	2a. Mailing Addre	ess		4. FEI Number		Applied For
์ ก			26				<u></u>	Not Applicable
Suite, Apt.	#, etc.		Suite, Apt. #,	, etc.		5. Certificate of Status Desired		75 Additional se Required
City & State	Э		City & State			6. Election Campaign Financing	<b>\$</b> 5	.00 May Be
3		\;	28	· · · · · · · · · · · · · · · · · · ·	··· · · · · · · · · · · · · · · · · ·	Trust Fund Contribution		Ided to Fees
<b>Z</b> ip ¬	Country	-	Zip	Cou	intry	8. This corporation has liability for		r s. 199.032,
4	25		29]	30		Florida Statutes	Yes W No	
	9. Name and Addres	s of Current He	egistereo Agent	<del> </del>	81 Name	10. Name and Address of New	Registered Agent	
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	NA, FRANCIS X				82 Street Ad	dress (P.O. Box Number is Not Accepted WEST FLACIER	ble)	
	est bay harbor dr				83		KEF	
Bay ha	krbor island fl 331	54			" GUI	TE 500		
					84 City	4 . 4 )	85	ZD COSE M
•								
or register	red agent, or both, in the S	State of Florida. S	Such change was:	authorized by the o	ve-named corp	oration submits this statement for the pard of directors. I hereby accept the ap	urpose of changing in pointment as registe	ts registered officered agent. I am
or register familia? wi	to the provisions of Section red agent, or both, in the S ith, and accept the obligati	State of Florida. Sions of, Section 6	Such change was 617.0503, Florida	authorized by the o Statutes.	ve-named corp	ard of directors. I hereby accept the accional accept the accional acceptance	pointment as registe	red agent. I am
or register familia? wi SIGNATURE 12.	red agent, or both, in the S ith, and accept the obligati Signature, typed or printed name of	State of Florida. Sions of, Section 6	Such change was 617.0503, Florida title if applicable.  IRECTORS	authorized by the ostatutes.  [NOTE Registered]  13.	ove-named corp corporation's bo	ard of directors. I hereby accept the are ired when reinstalling) ADDITIONS/CHANGES TO O	DATE FICERS AND DIREC	TORS IN
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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 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 617, Florida Statutes; and that my name appears in Block 12 of Block 13 if changed, or on an attachment with an address.

61 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY - ST-ZIP

54 CITY-ST-ZIP

\*\*\*61.25

SIGNATURE:

SANTANA, FRANCIS X

9900 WEST BAY HARBOR DRIVE APT 4

9900 WEST BAY HARBOR DRIVE APT 5

BAY HARBOR ISLAND FL 33154

**BAY HARBOR ISLAND FL 33154** 

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

DELETE

Addition