FILE	NOW	FILING FEE	AFT	ER MAY 1 K	S \$22	25.	.00					
	PROFIT			FLORIDA DEPAR			STATE					L
	IAL REPO	Particulation of the		Sandra E Secreta	3. Mortha ry of Sta							
1996 DIVISION OF CORPO						ATIC	ONS					
DOCUMENT # 147763 (7)												l
1. Corporation		DING COMPANY		、 <i>r</i>								
JIANN										HAII DIAX DI	AN ANNI ANNI ANT	
Principal Place	of Bi siness		 N	lailing Address			······					
740 \$ ANDREWS AVENUE 740 \$ ANDREWS AVENUE FT. LAUDERDALE FL 33316 FT. LAUDERDALE FL 33316												
								3. Date Incorporated or Qualified 07/08/1946		ite of Last 04/18/1		
2. Principal Pla	ace of Busine	ess		. Mailing Address				4. FEI Number	I		Applied For	
21 Suite, Apt. #	, etc	····	26	Suite, Apt. #, etc.				59-0552435 5. Certificate of Status Desired		\$8.	Not Applicable 75 Additional)
22 City & State				27 City & State				6. Election Campaign Financing			e Required	
23			28					 Election Campaign Financing Trust Fund Contribution 			.00 May Be ded to Fees	-
Zip 24	Zip Country			Zip	2ip Cou 30			 8. This corporation has liability for Florida Statutes IN Yes 	intangible	tax under	rs 199.032,	
· · · · · · · · · · · · · · · · · · ·		and Address of Curren	29 It Regi	stered Agent				10. Name and Address of New I	Registere	d Agent	·····	_
RIEGEIS	sen, jose	рн				81	Name					
740 S A	NDREWS /	VENUE				82	Street Addr	ess (P.O. Box Number is Not Accepta	DHE)			
FORT L	AUDE:RDAL	E FL 33316				83						
						84	City		F	L ⁸⁵	Zip Code	
or registere	ed agent, or	both, in the State of Florid	da. Suc	h change was authorize	s, the ab d by the	ove-r corp	named corpor oration's boar	ation submits this statement for the pure of of directors. I hereby accept the app	rpose of c pointment	hanging it as register	s registered offici red agent. I am	Θ
familiar wit SIGNATURE	h, and accep	ot the obligations of, Sect	ion 607	.0505, Florida Statutes.								
	Signature, typed	or printed name of registered agent OFFICERS AN			E: Registere	d Ager	t signature required	d when reinstating) ADDITIONS/CHANGES TO OFI			TORS IN 12	
TITLE	VD		0 0. 10	DELE IE		TITLE			10211071	Chanç		(12/95)
NAME STOCKLAPPERSO		sen, lewis m Andrews avenue				AME	1000100					2E034
STREET ADDRESS CITY - ST - ZIP		IDERDALE FL					ADDRESS ST - ZIP					R2E
TITLE	VST			DELETE		TITLE				🗋 Chang	je 🔲 Addition	0
NAME STREET ADDRESS	BIEGELSEN, JEFFREY P 740 S. ANDREWS AVENUE			_		2.2 NAME 2.3 STREET ADDRESS						
CITY-SI-ZIP	TY-SI-ZIP FT. LAUDERDALE FL			24			iT-ZIP	<u>.</u>			·····	
TITLE NAME	PD	sen, joseph z		DELETE		title Name				🔲 Chang	ge 🔲 Addition	
STREET ADDRESS	TREET ADDRESS 740 S. ANDREWS AVENUE						T ADDRESS					
CITY - ST - ZIP	FT. LAU	IDERDALE FL				СПҮ-5	5T-ZIP			CT Chaor		_
TITLE NAME				DELETE		TITLE NAME				🔲 Chang	e 🗌 Addition	
STREET ADDRESS					4.3 5	STREET	ADDRESS					
CITY-ST-ZIP							IT-ZIP		_,,	Chang	e 🗂 Addition	_
TITLE NAME						TITLE NAME						
STREET ADDRESS					5.3	STREET	ADDRESS					
CITY - ST - ZIP TITLE				DELETE		CITY - S Title	ST-ZIP			Chang	e [] Addition	
NAME				L) Martin		NAME						
STREET ADDRESS					6.3	STREET	ADDRESS					
CITY-ST-ZIP 14. I do hereb	v certity that	the information supplied	with thi	s filing is voluntarily furni			ST-ZIP Is not qualify f	or the exemption stated in Section 119).07(3)(k).	Florida Sta	atutes. I further	
certify that oath; that	í the informai I am an offic	tion indicated on this annu	ual repo tration	ort or supplemental annu or the receiver or trustee	al report	is tru	le and accura to execute thi	te and that my signature shall have the is report as required by Chapter 607, F EY P. BIEGELSEN APR 19 1	e same leg lorida Sta	al effect a utes; and 9 <i>5</i> ¥)	is if made under that my name	
SIGNAT	URE:	SIGNATURE AND TYPED OF		OF SIGRING OFFICE	A OR DIRE	CTOR	Vic	EPRESIDENT		463. Daytime Pho	6581	