CORPORATION ANNUAL REPORT 1998 A		PROFIT	<u></u>	·····	FIL	
1998       Devices or Dourison       Secretary of State         DOCUMENT # 177806       (7)         Constraint Name       (7)         State of Durines       Making Address         Chip A Durine       State of Durines         Chip A Durine       State of Durines <td< th=""><th>COF</th><th>RPORATION</th><th></th><th></th><th>Apr 24 199</th><th>98 8:00an</th></td<>	COF	RPORATION			Apr 24 199	98 8:00an
ROAD ROCK INC         Transpan="2">Transpan="2">Maling Address         Colspan="2">Colspan="2"         Colspan="2">Colspan="2"         Colspan="2"	ANN	1.	.7	•	Secretary	y of State
			6 (7)			
Maing Address     Maing Address       ROP LAUDERDALE FL 33311     SD N. 87H AVE FORT LAUDERDALE FL 33311     SD N. 87H AVE FORT LAUDERDALE FL 33311       Inncipal Place of Business     A Maing Address     4. FEI Number 600 / 19/54       Inncipal Place of Business     A Maing Address       Sode, Apt. #, etc.     Bullo, Apt. #, etc.       Bude, Apt. #, etc.     Bullo, Apt. #, etc.       City & State     E. Centrologies of Dusines       Zip     Country       Zip     Country       Zip     Country       Zip     Zip       Zip     Country       State     Country       State     D. Maine and Address of Country (an Internation Packward)       State     D. Maine and Address of Lownest year Interglatered Agent       PACKARD, MARTHA M BOON NW. 8TH AVENUE FORT LAUDERDALE FL 33311     41       State     State North Country (an Interglatered Agent Packard)     D. Name and Address of New Registered Agent Packard)       1. Present to the provisions of Scote and 602 tools 10000 for Corporation submits this statement for the purpose of changing for registered Packard States and New Registered Agent Packard States and Accepter to Scote and Scote 607 8002 and 602 10000 for Corporation submits this statement for the purpose of changing for registered Packard Types of the Address of Disc Corporation submits this statement for the purpose of changing for registered Packard Types of the Address of Disc Corporation submits this statement for the purpose of changing for registe						
Principal Pace of Busines     A Maing Address     Address     A FEI humber     Applied Face     Applied	900 N. W. 81	ih ave	900 N. W. 8TH AVE	33311	DO NOT WRITE IN T	THIS SPACE
Principal Pace of Business         2a.         Matrix Address         4. FEI Number         Applied For           Suite. Apt J., etc.         26         Suite. Apt J., etc.         Suite. Apt J.,						
Suite, Apt #, etc.       Suite, Apt #, etc.       Suite, Apt #, etc.       Suite, Apt #, etc.       \$       \$       Suite, Apt #, etc.       \$       \$       Suite, Apt #, etc.       \$       Suite, Apt #, etc.       \$       Suite, Apt #, etc.       \$       Suite, Apt #, etc.       \$       Suite, Apt #, etc.       \$	Principal P	Place of Business		<u> </u>	4. FEI Number	· · · · · · · · · · · · · · · · · · ·
City & State     City & State     City & State     Election Compaging Financing     Stock Nay Be       Zip     Country     2in     2in     Country     Encicion Compaging Financing     Stock Nay Be       Zip     Country     2in     2in     2in     Country     Encicon Compaging Financing     Maded to Fees       Zip     2in     2in     2in     2in     2in     Added to Fees       PACKARD, MARTHA M.     2in     2in     2in     10. Name and Address of New Registered Agent     10. Name and Address of New Registered Agent       PACKARD, MARTHA M.     8in     10. Name and Address of New Registered Agent     10. Name and Address of New Registered Agent       PORT LAUDERDALE FL 33311     8in     8in     10. Name and Address of New Registered Agent       office or registered agent, or Novin, in the State of Thords, Scatch charge was authorized by the coporation's based of directors. I hereby accept the obligation is directoring to scatch charge was authorized by the coporation's based of directors. I hereby accept the obligation is directoring to scatch charge was authorized by the coporation's based of directors. I hereby accept the obligation is directoring to scatch charge was authorized by the coporation's based of chargenge is registered agent. Tall fractions was authorized by accept the obligation is registered agent. Tall fractions was authorized by accept the obligation is registered agent. Tall fractions was authorized by accept the obligation is directoring. In 12 was a tallet was was a tall agent. Tall fractions was authoris and the scatheregis	Suite, Apt.	#, elc.				\$8.75 Additional
Zip         Country         Zip         Country         B. This coporation over or two paid the ourset year Intragible personal Property Tax due due not a due not an experimental personal Property Tax due due not a du	City & Stat	θ				Fee Required
B. Name and Address of Current Registered Agent     PACKARD, MARTHA M.     BOO N.W. 8TH AVENUE     FORT LAUDERDALE FL 33311     B3     Correspondence of Societies 607.0502 and 607.1508. Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered     agent. an Inteller with. and accept the obligations of Societies 607.0502 and 607.1508. Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered     agent. an Inteller with. and accept the obligations of Societies 607.0502 and 607.1508. Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered     agent. an Inteller with. and accept the obligations of Societies 607.0505. Change Statutes     Corporation's board of directors. I hereby accept the appointment as registered     agent. an Inteller with. and accept the obligations of Societies 607.0505. Change Statutes     Corporation's board of directors. I hereby accept the appointment as registered     agent. an Inteller with and Additions of Societies 607.0505.05 (Florida Statutes     Corporation's board of directors. I hereby accept the appointment as registered     agent. an Inteller with and Additions of Societies 607.0505.05 (Florida Statutes     Corporation's board of directors. I hereby accept the appointment as registered     agent. an Inteller with and Additions of Societies 607.0505.05 (Florida Statutes     Corporation's board of directors. I hereby accept the appointment as registered     agent. an Inteller With and Lark table     DELETE     Stretch Address (P.O. Box Number is Not Acceptable)     DELETE     Stretch Address     Stret		Country		Country		
PACKARD, MARTHA M. 90 N.W. 81H AVENUE FORT LAUDERDALE FL 33311       61       Name         82       Streat Address (P.O. Box Number is Not Acceptable)         83       64       City       FL       65         84       City       FL       65       2/D Code         85       64       City       FL       65       2/D Code         86       City       FL       65       2/D Code       64       City       FL       65       2/D Code         87       City       FL       65       2/D Code       64       City       FL       65       2/D Code         88       City       FL       67       10/E Expland transfer of biolds. Size of Biolds Size of				30		
Styraline types of printed area of inglatine if agrick allow     (hOTE: Regarder Agenesis grantum required intermentation)     DATE       c.     OFFICERS AND DIRECTORS     13.     ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12       LE     PTD     DELETE     11 TITLE       ME     ELMORE, ROBERT     12 NAME     13 STREFT ADDRESS       YST.20     FT LAUDERDLAE, FL CO0000     14 CITV.ST.20P     Change     Addition       LE     AS     DELETE     21 TITLE     Change     Addition       STEVENS, KENNETH G.     23 STREFT ADDRESS     Change     Addition       VSD     DELETE     21 TITLE     Change     Addition       VSD     DELETE     21 TITLE     Change     Addition       WE     VSD     DELETE     21 TITLE     Change     Addition       VSD     DELETE     31 TITLE     Change     Addition       WE     VSD     DELETE     31 TITLE     Change     Addit	Pursuant	to the provisions of Sections 607.050 registered agent, or both, in the State	2 and 607.1508, Florida Statu	utes, the above-named cor		
PTD     DELETE     1.1 TITLE     Change     Addition       MRE     ELMORE, ROBERT     12 NAME     12 NAME     13 STREET ADDRESS     14 CITY-ST-2IP     14	agent. La	im familiar with, and accept the obliga	ations of, Section 607.0505, F	authorized by the corpora forida Statutes.	ation's board of directors. I hereby accept the	e appointment as registered
900 N. W. 8TH AVE         13 STRET ADDRESS           FT LAUDERDLAE, FL C00000         14 CITY-ST-ZIP           LE         AS         □ DELETE         21 TITLE           WE         STEVENS, KENNETH G.         23 STRET ADDRESS           FT LAUDERDLAE, FL C00000         2 4 CITY-ST-ZIP           IV-ST-ZIP         FT LAUDERDLAE, FL C00000         2 4 CITY-ST-ZIP           ILE         VSD         2 1 TITLE         1 Addition           IV-ST-ZIP         FT LAUDERDLAE, FL C00000         2 4 CITY-ST-ZIP         1 Addition           ILE         VSD         DELETE         31 TITLE         1 Addition           We         PACKARD, MARTHA M.         32 NAME         3 STREET ADDRESS         1 Addition           WE         S00 N. W. 8TH AVE         33 STREET ADDRESS         1 Addition         1 Addition           We         PACKARD, MARTHA M.         32 NAME         3 STREET ADDRESS         1 Addition           Net ADDRESS         900 N. W. 8TH AVE         33 STREET ADDRESS         1 Addition           IV-ST-ZIP         IDELETE         41 TITLE         IChange         Addition           MEE         IDELETE         51 TITLE         IChange         Addition           MEE         S3 STREET ADDRESS         52 NAME	agont. I a IGNATURE	im familiar with, and accept the obligation of t	ations of, Section 607.0505, F	IOFICIA Statutos.	uired when reinstaling) Dr	ATE
Y-ST-ZIP       FT LAUDERDLAE, FL C00000       14 CITY-ST-ZIP         LE       AS       DELETE       21 TITLE         ME       STEVENS, KENNETH G.       22 NAME         412 NW 4TH ST       23 STREET ADDRESS         Y-ST-ZIP       FT LAUDERDLAE, FL C00000       24 CITY-ST-ZIP         LE       VSD       DELETE       31 TITLE         ME       PACKARD, MARTHA M.       32 NAME         REET ADDRESS       900 N. W. 8TH AVE       33 STREET ADDRESS         Y-ST-ZIP       FT LAUDERDLAE, FL C00000       34 CITY-ST-ZIP         ME       PACKARD, MARTHA M.       22 NAME         8E01 ADDRESS       900 N. W. 8TH AVE       33 STREET ADDRESS         Y-ST-ZIP       FT LAUDERDLAE, FL C00000       34 CITY-ST-ZIP         LE       DELETE       41 STREET ADDRESS         Y-ST-ZIP       44 CITY-ST-ZIP         LE       DELETE       43 STREET ADDRESS         Y-ST-ZIP       44 CITY-ST-ZIP         LE       DELETE       51 TITLE         ME       42 STARET ADDRESS       44 CITY-ST-ZIP         Y-ST-ZIP       44 CITY-ST-ZIP       Change       Additic         ME       52 NAME       53 STREET ADDRESS       54 CITY-ST-ZIP         LE	agont. I a GNATURE	Signature typed or printed name of registeric age OFFICERS AND	ations of, Section 607.0505, F and tile if applicable (NC D DIRECTORS	IOFICIA STALUTOS. ITE Registered Agent signature requ 13.	uired when reinstaling) Dr	ATE S AND DIRECTORS IN 12
LE       AS       I DELETE       2:1TILE       I Change       Addition         ME       STEVENS, KENNETH G.       2:3 STREET ADDRESS       2:3 STREET ADDRESS       2:4 CITV-ST-ZIP         V-ST-ZIP       FT LAUDERDLAE, FL CO0000       2:4 CITV-ST-ZIP       I Change       I Addition         ME       VSD       DELETE       3:1 TILE       I Change       I Addition         ME       PACKARD, MARTHA M.       3:2 NAME       I Change       I Addition         ME       PACKARD, MARTHA M.       3:2 NAME       I Change       I Addition         ME       900 N. W. 8TH AVE       3:3 STREET ADDRESS       I Change       I Addition         Y-ST-ZIP       FT LAUDERDLAE, FL CO0000       3:4 CITY-ST-ZIP       I Change       I Addition         ME       I DELETE       4:1 TITLE       I Change       I Addition         ME       I DELETE       4:1 TITLE       I Change       I Addition         ME       I DELETE       5:1 TITLE       I Change       I Addition         ME       I DELETE       5:1 TITLE       I Change       I Addition         ME       I DELETE       5:1 TITLE       I Change       I Addition         ME       I DELETE       5:1 TITLE       I Change <td< td=""><td>agont I a GNATURE</td><td>Signature typed or printed name of registeriod age OFFICERS AND PTD ELMORE, ROBERT</td><td>ations of, Section 607.0505, F and tile if applicable (NC D DIRECTORS</td><td>IOFICIA Statutes. DIE Registered Agent signature requ <b>13.</b> 1.1 TITLE 1.2 NAME</td><td>uired when reinstaling) Dr</td><td>ATE S AND DIRECTORS IN 12</td></td<>	agont I a GNATURE	Signature typed or printed name of registeriod age OFFICERS AND PTD ELMORE, ROBERT	ations of, Section 607.0505, F and tile if applicable (NC D DIRECTORS	IOFICIA Statutes. DIE Registered Agent signature requ <b>13.</b> 1.1 TITLE 1.2 NAME	uired when reinstaling) Dr	ATE S AND DIRECTORS IN 12
ALE T ADDRESS       412 NW 4TH ST,.       23 STREET ADDRESS         Y'.ST-ZIP       DELETE       31 TITLE         LE       VSD       DELETE         YSD       DELETE       31 TITLE         MEE       PACKARD, MARTHA M.       32 NAME         900 N. W. 8TH AVE       33 STREET ADDRESS         Y.ST-ZIP       FT LAUDERDLAE, FL COODOO       34 CITY-ST-ZIP         LE       DELETE       41 TITLE         MEET ADDRESS       Change       Addition         Y-ST-ZIP       FT LAUDERDLAE, FL COODOO       34 CITY-ST-ZIP         LE       DELETE       41 TITLE       Change         ME       42 NAME       43 STREET ADDRESS       43 STREET ADDRESS         Y-ST-ZIP       44 CITY-ST-ZIP       Change       Addition         ME       DELETE       51 TITLE       Change       Addition         ME       S2 NAME       53 STREET ADDRESS       S3 STREET ADDRESS       S3 STREET ADDRESS         Y-ST-ZIP       S4 CITY-ST-ZIP       Change       Addition         ME       S2 NAME       S3 STREET ADDRESS       S3 STREET ADDRESS         Y-ST-ZIP       S4 CITY-ST-ZIP       Change       Addition         MEET ADDRESS       S3 STREET ADDRESS       S4 CIT	agont. I E GNATURE LE ME REET ADDRESS	Signature typed or printed name of requiring age OFFICERS AND PTD ELMORE, ROBERT 900 N. W. 8TH AVE	anons of, Section 607.0505, F and tilk if again able (NC D DIRECTORS DELETE	IOFICIA Statutes. DTE Registered Agent signature requination of the signation of the signature requina	uired when reinstaling) Dr	ATE S AND DIRECTORS IN 12
Y-ST-2IP       FT LAUDERDLAE, FL CO0000       2 4 CITY-ST-ZIP         LE       VSD       DELETE       31 TITLE         ME       PACKARD, MARTHA M.       32 NAME         900 N. W. 8TH AVE       33 STREET ADDRESS         Y-ST-ZIP       FT LAUDERDLAE, FL CO0000       34 CITY-ST-ZIP         LE       DELETE       11 TITLE         LE       DELETE       41 TITLE         ME       42 NAME         HEF ADDRESS       43 STREET ADDRESS         Y-ST-ZIP       DELETE         LE       DELETE         LE       DELETE         ME       42 NAME         44 CITY-ST-ZIP         V-ST-ZIP       Change         Y-ST-ZIP       44 CITY-ST-ZIP         LE       DELETE         STREET ADDRESS       52 NAME         VET ADDRESS       53 STREET ADDRESS         Y-ST-ZIP       54 CITY-ST-ZIP         LE       DELETE       51 TITLE         KEET ADDRESS       54 CITY-ST-ZIP         LE       DELETE       61 TITLE         KEET ADDRESS       54 CITY-ST-ZIP         LE       DELETE       61 TITLE         KEET ADDRESS       53 STREET ADDRESS         KEET A	Agont. I E GNATURE LE ME REET ADDRESS Y-ST-ZIP	Signature typed or printed name of registeriod age OFFICERS AND PTD ELMORE, ROBERT 900 N. W. 8TH AVE FT LAUDERDLAE, FL C00000 AS	anons of, Section 607.0505, F ra and blik if applicable (NC D DIRECTORS	IOFICIA Statutes. DIE Registered Agent signature requinations and a statute requination of the second statute requires a se	uired when reinstaling) Dr	A1E SAND DIRECTORS IN 12 Change Additic
LE VSD DELETE 31 TILE Change Addition Addition PACKARD, MARTHA M. 32 NAME 33 STREET ADDRESS 500 N. W. 8TH AVE 53 STREET ADDRESS 500 N. W. 8TH AVE 52 NAME 42 NAME 43 STREET ADDRESS 44 CITY-ST-ZIP 100 DELETE 51 TITLE 51 TITLE 51 TITLE 51 TITLE 51 STREET ADDRESS 52 NOT STREET ADDRESS 53 STREET ADDRESS 54 CITY-ST-ZIP 100 DELETE 51 TITLE 53 STREET ADDRESS 54 CITY-ST-ZIP 100 DELETE 51 TITLE 53 STREET ADDRESS 54 CITY-ST-ZIP 100 DELETE 51 TITLE 54 CITY-ST-ZIP 100 DELETE 54 DORESS 100 DELETE 100 DELETE 54 DORESS 100 DELETE 100 DE	agont T a GNATURE LE ME REET ADDRESS IY-ST-ZIP LE ME	Signature typed or printed name of regulation age OFFICERS AND PTD ELMORE, ROBERT 900 N. W. 8TH AVE FT LAUDERDLAE, FL C00000 AS STEVENS, KENNETH G.	anons of, Section 607.0505, F ra and blik if applicable (NC D DIRECTORS	IOTICIA Statutes. DTE Registered Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE 2.2 NAME	uired when reinstaling) Dr	A1E SAND DIRECTORS IN 12 Change Additic
POO N. W. 8TH AVE       33 STREET ADDRESS         IY - ST - ZIP       34 GITY - ST - ZIP         LE       DELETE       41 TITLE         ME       42 NAME         REET ADDRESS       43 STREET ADDRESS         IY - ST - ZIP       44 CITY - ST - ZIP         LE       DELETE         ME       1 DELETE         LE       DELETE         ME       1 DELETE         ME       1 DELETE         LE       DELETE         ME       1 DELETE         ME       1 DELETE         STREET ADDRESS       1 OELETE         STREET ADDRESS       1 OELETE         STREET ADDRESS       1 OELETE         ME       52 NAME         STREET ADDRESS       53 STREET ADDRESS         IY - ST - ZIP       54 CITY - ST - ZIP         LE       DELETE       54 CITY - ST - ZIP         LE       DELETE       61 TITLE         ME       63 STREET ADDRESS         REET ADDRESS       53 STREET ADDRESS         REET ADDRESS       63 STREET ADDRESS	agont. T a GNATURE L L ME REET ADDRESS IY-ST-ZIP L E ME REET ADDRESS	Signature typed or printed name of registeric age OFFICERS AND PTD ELMORE, ROBERT 900 N. W. 8TH AVE FT LAUDERDLAE, FL C00000 AS STEVENS, KENNETH G. 412 NW 4TH ST.	alions of, Section 607.0505, F	IORICIA Statutes. DTE Registered Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS	uired when reinstaling) Dr	A1E SAND DIRECTORS IN 12 Change Addilio
FT LAUDERDLAE, FL CO0000       34 CITY-ST-ZIP         LE       DELETE         ME       4 CITY-ST-ZIP         ME       43 STREET ADDRESS         IV-ST-ZIP       DELETE         DELETE       1 TITLE         ME       43 STREET ADDRESS         IV-ST-ZIP       DELETE         DELETE       51 TITLE         ME       52 NAME         REET ADDRESS       53 STREET ADDRESS         IV-ST-ZIP       54 CITY-ST-ZIP         LE       DELETE         DELETE       51 TITLE         ME       52 NAME         ST-ST-ZIP       54 CITY-ST-ZIP         LE       DELETE         STREET ADDRESS       54 CITY-ST-ZIP         LE       DELETE         STREET ADDRESS       54 CITY-ST-ZIP         LE       DELETE         STREET ADDRESS       Change         Addition       Addition         ME       Change         Addition       Addition         STREET ADDRESS       Change         ADDELETE       61 TITLE         STREET ADDRESS       Change         ADDRESS       Change         STREET ADDRESS       Change	agont. T a GNATURE 2. ME REET ADDRESS IY-ST-ZIP ILE ME REET ADDRESS IY-ST-ZIP	Signature typed or printed name of registered age OFFICERS AND PTD ELMORE, ROBERT 900 N. W. 8TH AVE FT LAUDERDLAE, FL C00000 AS STEVENS, KENNETH G. 412 NW 4TH ST., FT LAUDERDLAE, FL C00000 VSD	DIRECTORS	IORICIA Statutes. DTE Registered Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP	uired when reinstaling) Dr	ATE AND DIRECTORS IN 12 Change Additio
ILE DELETE 41 TITLE Change Addition ME 42 NAME REEF ADDRESS TY-ST-ZIP LE DELETE 51 TITLE Change Addition ME 52 NAME REET ADDRESS TY-ST-ZIP LE Change Addition 53 STREET ADDRESS 54 CITY-ST-ZIP LE Change Addition 53 STREET ADDRESS 54 CITY-ST-ZIP Change Addition 53 STREET ADDRESS 54 CITY-ST-ZIP	agont. T a IGNATURE 2. INE REET ADDRESS TY-ST-ZIP ILE INE INE INE INE INE	Signature typed or printed name of registered age OFFICERS AND PTD ELMORE, ROBERT 900 N. W. 8TH AVE FT LAUDERDLAE, FL C00000 AS STEVENS, KENNETH G. 412 NW 4TH ST FT LAUDERDLAE, FL C00000 VSD PACKARD, MARTHA M.	DIRECTORS	IORICIA Statutes. DTE Registered Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP 3.1 TITLE 3.2 NAME	uired when reinstaling) Dr	ATE AND DIRECTORS IN 12 Change Additio
REEF ADDRESS       43 STREEF ADDRESS         IV-S1-ZIP       44 CITY-S1-ZIP         LE       DELETE       5.1 TITLE         ME       52 NAME         REEF ADDRESS       53 STREEF ADDRESS         IV-S1-ZIP       54 CITY-S1-ZIP         LE       6.1 TITLE         ME       Change         ME       ME         Change       Addition         Streef ADDRESS       Change         ME       Change         ME       Change         ME       Change         Addition       Addition         ME       Change         ME       Change         Addition       Addition         ADDRESS       Change         Addition       Addition         ADDRESS       Change         ADDRESS       Change         Addition       Addition         ADDRESS       Change         ADDRESS       Change	agont. T a GNATURE 2. ME REET ADDRESS IY-ST-ZIP ILE ME REET ADDRESS IY-ST-ZIP ILE ME REET ADDRESS	Signature typed or printed name of registered age OFFICERS AND PTD ELMORE, ROBERT 900 N. W. 8TH AVE FT LAUDERDLAE, FL C00000 AS STEVENS, KENNETH G. 412 NW 4TH ST,. FT LAUDERDLAE, FL C00000 VSD PACKARD, MARTHA M. 900 N. W. 8TH AVE	DIRECTORS DELETE DELETE DELETE	IOTICIA Statutes. DTE Registered Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS	uired when reinstaling) Dr	ATE AND DIRECTORS IN 12 Change Additio
TY-ST-ZIP     44 CITY-ST-ZIP       TLE     DELETE       ME     52 NAME       S3 STREET ADDRESS       TY-ST-ZIP       61 TITLE       DELETE       61 TITLE       Change       Addition       ME       S3 STREET ADDRESS       Change       Addition       S4 CITY-ST-ZIP       Change       Addition       Addition       S5 STREET ADDRESS       Change       Addition       Addition       S1 TITLE       Change       Addition       Addition       S1 TITLE       Change       Addition       Addition       S1 TITLE       Change       Change       S1 TITLE       Change       S1 TITLE       Change       S1 TITLE       Change       Change       Change       Change <td>agont. 1 a IGNATURE 2. IGNATURE 2. ILE WE REET ADDRESS TY-ST-ZIP TLE REET ADDRESS TY-ST-ZIP TLE REET ADDRESS TY-ST-ZIP TLE</td> <td>Signature typed or printed name of registered age OFFICERS AND PTD ELMORE, ROBERT 900 N. W. 8TH AVE FT LAUDERDLAE, FL C00000 AS STEVENS, KENNETH G. 412 NW 4TH ST,. FT LAUDERDLAE, FL C00000 VSD PACKARD, MARTHA M. 900 N. W. 8TH AVE</td> <td>DIRECTORS DELETE DELETE DELETE DELETE</td> <td>IOTICIA STATUTOS. DTE Registered Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP 4.1 TITLE</td> <td>uired when reinstaling) Dr</td> <td>A1E AND DIRECTORS IN 12 Change Additio</td>	agont. 1 a IGNATURE 2. IGNATURE 2. ILE WE REET ADDRESS TY-ST-ZIP TLE REET ADDRESS TY-ST-ZIP TLE REET ADDRESS TY-ST-ZIP TLE	Signature typed or printed name of registered age OFFICERS AND PTD ELMORE, ROBERT 900 N. W. 8TH AVE FT LAUDERDLAE, FL C00000 AS STEVENS, KENNETH G. 412 NW 4TH ST,. FT LAUDERDLAE, FL C00000 VSD PACKARD, MARTHA M. 900 N. W. 8TH AVE	DIRECTORS DELETE DELETE DELETE DELETE	IOTICIA STATUTOS. DTE Registered Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP 4.1 TITLE	uired when reinstaling) Dr	A1E AND DIRECTORS IN 12 Change Additio
ME 52 NAME 52 NAME 53 STREET ADDRESS 54 CITY - ST - ZIP Change Addretice 61 TITLE 61 TITLE 61 TITLE 61 TITLE 63 STREET ADDRESS 63 STREET ADDRESS 63 STREET ADDRESS	agont. 1 a           IGNATURE           IGNATURE           ILE           ME           REET ADDRESS           IY-ST-ZIP           ILE           ME           ME	Signature typed or printed name of registered age OFFICERS AND PTD ELMORE, ROBERT 900 N. W. 8TH AVE FT LAUDERDLAE, FL C00000 AS STEVENS, KENNETH G. 412 NW 4TH ST,. FT LAUDERDLAE, FL C00000 VSD PACKARD, MARTHA M. 900 N. W. 8TH AVE	DIRECTORS DELETE DELETE DELETE DELETE	IOTICIA STATUTOS. DTE Registered Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP 4.1 TITLE 4.2 NAME	uired when reinstaling) Dr	A1E AND DIRECTORS IN 12 Change Additio
REET ADDRESS     5.3 STREET ADDRESS       TY-ST-ZIP     5.4 CITY-ST-ZIP       LLE     DELETE       6.1 TITLE     Change       Address       REET ADDRESS       6.3 STREET ADDRESS	agont. 1 a           IGNATURE           IGNATURE           ILE           IME           REET ADDRESS           IY-ST-ZIP           ILE           IME           REET ADDRESS           IY-ST-ZIP           ILE           IME           REET ADDRESS           IY-ST-ZIP           ILE           ME           REET ADDRESS           IY-ST-ZIP           ILE           ME           REET ADDRESS           IY-ST-ZIP           ILE           ME           REET ADDRESS	Signature typed or printed name of registered age OFFICERS AND PTD ELMORE, ROBERT 900 N. W. 8TH AVE FT LAUDERDLAE, FL C00000 AS STEVENS, KENNETH G. 412 NW 4TH ST,. FT LAUDERDLAE, FL C00000 VSD PACKARD, MARTHA M. 900 N. W. 8TH AVE	DIRECTORS DELETE DELETE DELETE DELETE	IOTICIA STATUTOS. DTE Registered Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS	uired when reinstaling) Dr	A1E AND DIRECTORS IN 12 Change Additio
TY-ST-ZIP     54 CITY-ST-ZIP       LLE     DELETE       6.1 TITLE     Change       ME     62 NAME       REET ADDRESS     6.3 STREET ADDRESS	agont. 1 a           agont. 1 a           IGNATURE           IGNATURE           ILE           ME           REET ADDRESS           IY-ST-ZIP           ILE	Signature typed or printed name of registered age OFFICERS AND PTD ELMORE, ROBERT 900 N. W. 8TH AVE FT LAUDERDLAE, FL C00000 AS STEVENS, KENNETH G. 412 NW 4TH ST,. FT LAUDERDLAE, FL C00000 VSD PACKARD, MARTHA M. 900 N. W. 8TH AVE	DIRECTORS DELETE DELETE DELETE DELETE DELETE DELETE	IOTICIA STATUTOS. DTE Registered Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY - ST - ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP 5.1 TITLE	uired when reinstaling) Dr	A1E AND DIRECTORS IN 12 Change Additio Change Additio
LE DELETE 6.1 TIFLE Change Addition ME 62 NAME REET ADDRESS 6.3 STREET ADDRESS	agont. 1 a           agont. 1 a           IGNATURE           IGNATURE           ILE           ME           REET ADDRESS           IY-SI-ZIP           ILE           ME           ME           ME	Signature typed or printed name of registered age OFFICERS AND PTD ELMORE, ROBERT 900 N. W. 8TH AVE FT LAUDERDLAE, FL C00000 AS STEVENS, KENNETH G. 412 NW 4TH ST,. FT LAUDERDLAE, FL C00000 VSD PACKARD, MARTHA M. 900 N. W. 8TH AVE	DIRECTORS DELETE DELETE DELETE DELETE DELETE DELETE	IOTICIA STATUTOS. DTE Registered Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 4.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME	uired when reinstaling) Dr	A1E AND DIRECTORS IN 12 Change Additio Change Additio
REET ADDRESS	agont. 1 a           IGNATURE           IGNATURE           ILE           ME           REET ADDRESS           IY-ST-ZIP           ILE           ME           REET ADDRESS	Signature typed or printed name of registered age OFFICERS AND PTD ELMORE, ROBERT 900 N. W. 8TH AVE FT LAUDERDLAE, FL C00000 AS STEVENS, KENNETH G. 412 NW 4TH ST,. FT LAUDERDLAE, FL C00000 VSD PACKARD, MARTHA M. 900 N. W. 8TH AVE	DIRECTORS DELETE DELETE DELETE DELETE DELETE DELETE	IOTICIA STATUTES. DTE Registered Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS	uired when reinstaling) Dr	A1E AND DIRECTORS IN 12 Change Additio Change Additio
	agont T a IGNATURE 2. IGNATURE 2. IREET ADDRESS TY-ST-ZIP TLE AME IREET ADDRESS TY-ST-ZIP TLE IREET ADDRESS TY-ST-ZIP TLE IREET ADDRESS TY-ST-ZIP TLE IREET ADDRESS TY-ST-ZIP TLE	Signature typed or printed name of registered age OFFICERS AND PTD ELMORE, ROBERT 900 N. W. 8TH AVE FT LAUDERDLAE, FL C00000 AS STEVENS, KENNETH G. 412 NW 4TH ST,. FT LAUDERDLAE, FL C00000 VSD PACKARD, MARTHA M. 900 N. W. 8TH AVE	Alions of, Section 607.0505, F	IOTICIA STATUTOS. DTE Registered Agent signature required a signature required and a signature required and a signature required a street address and a street address a street	uired when reinstaling) Dr	A1E
	agont T a IGNATURE 2. IGNATURE 2. IREET ADDRESS IY-ST-ZIP TLE AME IREET ADDRESS IY-ST-ZIP TLE IREET ADDRESS IY-ST-ZIP TLE IREET ADDRESS IY-ST-ZIP TLE IREET ADDRESS IY-ST-ZIP TLE IREET ADDRESS IY-ST-ZIP TLE IREET ADDRESS IY-ST-ZIP TLE IREET ADDRESS IY-ST-ZIP TLE IREET ADDRESS IY-ST-ZIP ILE IREET ADDRESS IY-ST-ZIP ILE IREET ADDRESS	Signature typed or printed name of registered age OFFICERS AND PTD ELMORE, ROBERT 900 N. W. 8TH AVE FT LAUDERDLAE, FL C00000 AS STEVENS, KENNETH G. 412 NW 4TH ST,. FT LAUDERDLAE, FL C00000 VSD PACKARD, MARTHA M. 900 N. W. 8TH AVE	Alions of, Section 607.0505, F	IOTICIA STATUTES. DIE Registered Agent signature required 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME	uired when reinstaling) Dr	A1E