## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # 338909

 Corporation Name DOV SAADINIAC INC

FILED
Feb 17, 1999 8:00am
Secretary of State

02-17-1999 90055 037 \*\*\*150.00



	INAS, INC.						
Principal Place	of Business	Mailing Address		ļ	1		1
•	or basiness	P O BOX 13052					· /
P O BOX 13052 PORT EVERGLADES STATION		PORT EVERGLADES STATION			DO NOT WRITE IN THIS SPACE		
FT. LAUDERDALE FL 33316		FT. LAUDERDALE FL 33316			3. Date Incorporated or Qualifed		
					12/13/1968		-
					12/13/1900 4. FEI Number	Ann	lied For
2. Principal Pla	ace of Business	2a. Mailing Address			1 11		Applicable
21		26			59-1277434	\$8.75 A	
Suite, Apt. #	t, etc.	Suite, Apt. #, etc.			5 Certificate of Status Desired	Fee Rec	
22	<u> </u>	27				\$5.00	May Be
City & State		City & State			6. Election Campaign Financing Trust Fund Contribution	Added to	
23		28			8. This corporation owes the currer		
Zip	Country	Zip	Country		Personal Property Tax.	Yes	□No
24	25	29 3	0		10. Name and Address of New Re	gistered Agent	
	9. Name and Address of Curre	ent Registered Agent	81	Name	10. Name and Addison		,
			"				
	ESY, JOSEPH		82	Street Addre	ess (P.O. Box Number is Not Acceptab	ole)	
	NW 25TH ST				1 345 T. 5 4 1 5 1 6 1	1 (2) 46	TI YAK KA
	A RATON, FL		83		1993、自治學學問題	對關於自由的語	31. 经验证
3343	1		84	City	The second secon	FL 85 Zip C	Code
	10 11 007.00	502 and 607 1508 Florida Statutes	s, the above	e-named corpo	oration submits this statement for the pon's board of directors. I hereby accept	the appointment as re	gistered
11. Pursuant office or reagent. I a	to the provisions of Sections 607.05 egistered agent, or both, in the Stat m familiar with, and accept the obliq	te of Florida. Such change was aut gations of, Section 607.0505, Florid	thorized by da Statutes	the corporatio	n's poard of directors, i hereby accept		
11. Pursuant office or ragent. I a SIGNATURE	egistered agent, or both, in the Glad m familiar with, and accept the obliq	gations of, Section 607.0505, Florid	da Statutés	i.	1 when reinstating): ! . % \>i	DATE	
office of reagent. I a	m familiar with, and accept the oblig	gations of, Section 607.0505, Florid gent and title if applicable. (NOTE: F	da Statutés	i.	I when reinstating)  ADDITIONS/CHANGES TO OFF	DATE	RS IN 12
office of ragent. I a SIGNATURE	egistered agent, or both, in the state m familiar with, and accept the oblig Signature, typed or printed name of registered a OFFICERS A	gations of, Section 607.0505, Florid	da Statutes	i.	d when reinstating) (1.14-15) ADDITIONS/CHANGES TO OFF	DATE	
office or ragent. I a SIGNATURE  12. TITLE	egistered agent, or both, in the state m familiar with, and accept the oblig Signature, typed or printed name of registered a OFFICERS A	gations of, Section 607.0505, Florid gent and title if applicable. (NOTE: F AND DIRECTORS	da Statutes Registered Ager	i.	1 when reinstating): ! . % \>i	DATE	RS IN 12
office or ragent. I a SIGNATURE  12. TITLE NAME	egistered agent, or both, in the state m familiar with, and accept the oblig signature, typed or printed name of registered a OFFICERS A PD JARKESY, JOSEPH E	gations of, Section 607.0505, Florid gent and title if applicable. (NOTE: F AND DIRECTORS	Registered Ager 13. 1.1 TITLE 1.2 NAME	nt signature required	d when reinstating) (1.14-15) ADDITIONS/CHANGES TO OFF	DATE	RS IN 12
office of ragent. I a SIGNATURE  12. TITLE	Signature. typed or printed name of registered a OFFICERS A  PD  JARKESY, JOSEPH E  2060 NW 25TH ST	gations of, Section 607.0505, Florid gent and title if applicable. (NOTE: F AND DIRECTORS	Registered Ager  13. 1.1 TITLE 1.2 NAME 1.3 STREE	nt signature required	d when reinstating) (1.14-15) ADDITIONS/CHANGES TO OFF	DATE CICERS AND DIRECTO	PRS IN 12
office or in agent. I a SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	Signature, typed or printed name of registered a OFFICERS A  PD  JARKESY, JOSEPH E  2060 NW 25TH ST  BOCA RATON, FL 00000	gations of, Section 607.0505, Floric gent and title if applicable. (NOTE: F AND DIRECTORS	Registered Ager 13. 1.1 TITLE 1.2 NAME 1.3 STREE* 1.4 CITY-S	nt signature required	d when reinstating) (1.14-15) ADDITIONS/CHANGES TO OFF	DATE	RS IN 12
office or in agent. I a SIGNATURE  12.  TITLE  NAME  STREET ADDRESS	Signature, typed or printed name of registered a OFFICERS A  PD  JARKESY, JOSEPH E  2060 NW 25TH ST  BOCA RATON, FL 00000  SD	gations of, Section 607.0505, Florid gent and title if applicable. (NOTE: F AND DIRECTORS	Registered Ager 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE	nt signature required	d when reinstating) (1.14-15) ADDITIONS/CHANGES TO OFF	DATE CICERS AND DIRECTO	PRS IN 12
office or in agent. I a SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP	Signature, typed or printed name of registered a OFFICERS A  PD  JARKESY, JOSEPH E  2060 NW 25TH ST  BOCA RATON, FL 00000  SD  JARKESY, THOMAS	gations of, Section 607.0505, Floric gent and title if applicable. (NOTE: F AND DIRECTORS	Registered Ager 13. 1.1 TITLE 1.2 NAME 1.3 STREE* 1.4 CITY-S 2.1 TITLE 2.2 NAME	nt signature required  T ADDRESS	d when reinstating) (1.14-15) ADDITIONS/CHANGES TO OFF	DATE CICERS AND DIRECTO	PRS IN 12
office or ragent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	signature, typed or printed name of registered a OFFICERS A  PD JARKESY, JOSEPH E 2060 NW 25TH ST BOCA RATON, FL 00000 SD JARKESY, THOMAS 2733 NE 26TH TERR	gations of, Section 607.0505, Floric gent and title if applicable. (NOTE: F AND DIRECTORS	Registered Ager 13. 1.1 TITLE 1.2 NAME 1.3 STREE: 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE	nt signature required  T ADDRESS 37-ZIP	d when reinstating) (1.14-15) ADDITIONS/CHANGES TO OFF	DATE CICERS AND DIRECTO	PRS IN 12
office or in agent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP	PD JARKESY, JOSEPH E 2060 NW 25TH ST BOCA RATON, FL 00000 SD JARKESY, THOMAS 2733 NE 26TH TERR FT LAUDERDALE, FL 00000	gations of, Section 607.0505, Floric gent and title if applicable. (NOTE: F AND DIRECTORS	Registered Ager 13. 1.1 TITLE 1.2 NAME 1.3 STREE* 1.4 CITY-S 2.1 TITLE 2.2 NAME	nt signature required  T ADDRESS  T-ZIP	d when reinstating) (1.14-15) ADDITIONS/CHANGES TO OFF	DATE CICERS AND DIRECTO	PRS IN 12
office or riagent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PD JARKESY, JOSEPH E 2060 NW 25TH ST BOCA RATON, FL 00000 SD JARKESY, THOMAS 2733 NE 26TH TERR FT LAUDERDALE, FL 00000 D	gations of, Section 607.0505, Floric gent and title if applicable. (NOTE: F AND DIRECTORS DELETE	Registered Ager 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-1 3.1 TITLE	T ADDRESS ST-ZIP ST-ZIP	d when reinstating) (1.14-15) ADDITIONS/CHANGES TO OFF	DATE CICERS AND DIRECTO Change	PRS IN 12 Addition Addition
office or in agent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP	PD JARKESY, JOSEPH E 2060 NW 25TH ST BOCA RATON, FL 00000 SD JARKESY, THOMAS 2733 NE 26TH TERR FT LAUDERDALE, FL 00000 D JARKESY, LÖNNY	gations of, Section 607.0505, Floric gent and title if applicable. (NOTE: F AND DIRECTORS DELETE	Registered Ager 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME	T ADDRESS ST-ZIP ST-ZIP	d when reinstating) (1.14-15) ADDITIONS/CHANGES TO OFF	DATE CICERS AND DIRECTO Change	PRS IN 12 Addition Addition
office or ragent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE TITLE	PD JARKESY, JOSEPH E 2060 NW 25TH ST BOCA RATON, FL 00000 SD JARKESY, THOMAS 2733 NE 26TH TERR FT LAUDERDALE, FL 00000 D JARKESY, LONNY 2060 NW 25TH ST	gations of, Section 607.0505, Floric gent and title if applicable. (NOTE: F AND DIRECTORS DELETE	Registered Ager 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE	T ADDRESS ST-ZIP ST ADDRESS ST-ZIP	d when reinstating) (1.14-15) ADDITIONS/CHANGES TO OFF	DATE CICERS AND DIRECTO Change	PRS IN 12 Addition Addition
office or in agent. I a SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  NAME  NAME	Signature, typed or printed name of registered a OFFICERS A  PD JARKESY, JOSEPH E 2060 NW 25TH ST BOCA RATON, FL 00000 SD JARKESY, THOMAS 2733 NE 26TH TERR FT-LAUDERDALE, FL-00000 D JARKESY, LONNY	gations of, Section 607.0505, Florid gent and title if applicable. (NOTE: F AND DIRECTORS  DELETE  DELETE	Registered Ager 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 3.4, CITY-	T ADDRESS ST-ZIP ST ADDRESS ST-ZIP	d when reinstating) (1.14-15) ADDITIONS/CHANGES TO OFF	DATE CICERS AND DIRECTO Change	PRS IN 12 Addition Addition
office or ragent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS SITY-ST-ZIP TITLE NAME STREET ADDRESS	PD JARKESY, JOSEPH E 2060 NW 25TH ST BOCA RATON, FL 00000 SD JARKESY, THOMAS 2733 NE 26TH TERR FT LAUDERDALE, FL 00000 D JARKESY, LONNY 2060 NW 25TH ST	gations of, Section 607.0505, Floric gent and title if applicable. (NOTE: F AND DIRECTORS DELETE	Registered Ager 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-I 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY-I 4.1 TITLE	T ADDRESS T-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP	d when reinstating) (1.14-15) ADDITIONS/CHANGES TO OFF	DATE CICERS AND DIRECTO Change	PRS IN 12 Addition Addition
office or ragent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD JARKESY, JOSEPH E 2060 NW 25TH ST BOCA RATON, FL 00000 SD JARKESY, THOMAS 2733 NE 26TH TERR FT LAUDERDALE, FL 00000 D JARKESY, LONNY 2060 NW 25TH ST	gations of, Section 607.0505, Florid gent and title if applicable. (NOTE: F AND DIRECTORS  DELETE  DELETE	Registered Ager 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY-4.1 TITLE 4.2 NAME	T ADDRESS ST-ZIP ET ADDRESS ST-ZIP	d when reinstating) (1.14-15) ADDITIONS/CHANGES TO OFF	DATE CICERS AND DIRECTO Change	PRS IN 12 Addition Addition
office or ragent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PD JARKESY, JOSEPH E 2060 NW 25TH ST BOCA RATON, FL 00000  JARKESY, THOMAS 2733 NE 26TH TERR FT LAUDERDALE, FL 00000  JARKESY, LONNY 2060 NW 25TH ST BOCA RATON, FL 00000	gations of, Section 607.0505, Florid gent and title if applicable. (NOTE: F AND DIRECTORS  DELETE  DELETE	Registered Ager 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY- 4.1 TITLE 4.2 NAME	T ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS	d when reinstating) (1.14-15) ADDITIONS/CHANGES TO OFF	DATE CICERS AND DIRECTO Change	PRS IN 12 Addition Addition
office or ragent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PD JARKESY, JOSEPH E 2060 NW 25TH ST BOCA RATON, FL 00000  JARKESY, THOMAS 2733 NE 26TH TERR FT LAUDERDALE, FL 00000  JARKESY, LONNY 2060 NW 25TH ST BOCA RATON, FL 00000	gent and title if applicable.  AND DIRECTORS  DELETE  DELETE	Registered Ager 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY- 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY- 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY-	T ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	d when reinstating) (1.14-15) ADDITIONS/CHANGES TO OFF	DATE CICERS AND DIRECTO Change	PRS IN 12 Addition Addition
office or ragent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PD JARKESY, JOSEPH E 2060 NW 25TH ST BOCA RATON, FL 00000  JARKESY, THOMAS 2733 NE 26TH TERR FT LAUDERDALE, FL 00000  JARKESY, LONNY 2060 NW 25TH ST BOCA RATON, FL 00000	gations of, Section 607.0505, Florid gent and title if applicable. (NOTE: F AND DIRECTORS  DELETE  DELETE	Registered Ager 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY- 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY- 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY- 5.1 TITLE	T ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP	d when reinstating) (1.14-15) ADDITIONS/CHANGES TO OFF	DATE FICERS AND DIRECTO Change Change	RS IN 12 Addition Addition
office or ragent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD JARKESY, JOSEPH E 2060 NW 25TH ST BOCA RATON, FL 00000  JARKESY, THOMAS 2733 NE 26TH TERR FT LAUDERDALE, FL 00000  JARKESY, LONNY 2060 NW 25TH ST BOCA RATON, FL 00000	gent and title if applicable.  AND DIRECTORS  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY- 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY-S 5.1 TITLE 5.2 NAME	T ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ET ADDRESS ST-ZIP ST-ZIP	d when reinstating) (1.14-15) ADDITIONS/CHANGES TO OFF	DATE FICERS AND DIRECTO Change Change	RS IN 12 Addition Addition
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered a OFFICERS A OFFICERS A OFFICERS A OFFICERS A PD JARKESY, JOSEPH E 2060 NW 25TH ST BOCA RATON, FL 00000 SD JARKESY, THOMAS 2733 NE 26TH TERR FT LAUDERDALE, FL 00000 D JARKESY, LONNY 2060 NW 25TH ST BOCA RATON, FL 00000	gent and title if applicable.  AND DIRECTORS  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 4.1 TITLE 4.2 NAME 4.3 STREE 4.2 NAME 5.3 STREE 5.1 TITLE 5.2 NAME 5.3 STREE 5.3 STREE 5.3 STREE 5.3 STREE	T ADDRESS ST-ZIP  ET ADDRESS ST-ZIP  ET ADDRESS ST-ZIP  ET ADDRESS ST-ZIP	ADDITIONS/CHANGES TO OFF	DATE FICERS AND DIRECTO Change Change	RS IN 12 Addition Addition
SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered a OFFICERS A OFFICERS A OFFICERS A OFFICERS A PD JARKESY, JOSEPH E 2060 NW 25TH ST BOCA RATON, FL 00000 SD JARKESY, THOMAS 2733 NE 26TH TERR FT LAUDERDALE, FL 00000 D JARKESY, LONNY 2060 NW 25TH ST BOCA RATON, FL 00000	gent and title if applicable. (NOTE: FAND DIRECTORS   DELETE   DEL	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 4.1 TITLE 4.2 NAME 4.3 STREE 4.2 NAME 5.3 STREE 5.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY-S 5.1 TITLE 5.3 STREE 5.4 CITY-S 5.4 CITY-S 5.4 CITY-S 5.5 STREE 5.5 STR	T ADDRESS ST-ZIP  ET ADDRESS ST-ZIP  ET ADDRESS ST-ZIP  ET ADDRESS ST-ZIP  ET ADDRESS ST-ZIP	d when reinstating) (1.14-15) ADDITIONS/CHANGES TO OFF	DATE FICERS AND DIRECTO Change Change	Addition  Addition  Addition
Office or ragent. I a agent. I a signature  12. Title Name Street address city-st-zip title Name Street address str	Signature, typed or printed name of registered a OFFICERS A OFFICERS A OFFICERS A OFFICERS A PD JARKESY, JOSEPH E 2060 NW 25TH ST BOCA RATON, FL 00000 SD JARKESY, THOMAS 2733 NE 26TH TERR FT LAUDERDALE, FL 00000 D JARKESY, LONNY 2060 NW 25TH ST BOCA RATON, FL 00000	gent and title if applicable.  AND DIRECTORS  DELETE  DELETE	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 4.1 TITLE 4.2 NAME 4.3 STREE 4.2 NAME 5.3 STREE 4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY-S 6.1 TITLE	T ADDRESS ST-ZIP  ET ADDRESS ST-ZIP	ADDITIONS/CHANGES TO OFF	DATE CHANGE  Change  Change  Change	Addition  Addition  Addition
office or in agent. I a SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered a OFFICERS A OFFICERS A OFFICERS A OFFICERS A PD JARKESY, JOSEPH E 2060 NW 25TH ST BOCA RATON, FL 00000 SD JARKESY, THOMAS 2733 NE 26TH TERR FT LAUDERDALE, FL 00000 D JARKESY, LONNY 2060 NW 25TH ST BOCA RATON, FL 00000	gent and title if applicable. (NOTE: FAND DIRECTORS   DELETE   DEL	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 4.1 TITLE 4.2 NAME 4.3 STREE 4.2 NAME 5.3 STREE 4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY-G 6.1 TITLE 6.2 NAME	T ADDRESS ST-ZIP  ET ADDRESS ST-ZIP	ADDITIONS/CHANGES TO OFF	DATE CHANGE  Change  Change  Change	Addition  Addition  Addition
Office or ragent. I a SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY- ST-ZIP TITLE NAME	PD JARKESY, JOSEPH E 2060 NW 25TH ST BOCA RATON, FL 00000  JARKESY, THOMAS 2733 NE 26TH TERR FT-LAUDERDALE, FL-00000  JARKESY, LONNY 2060 NW 25TH ST BOCA RATON, FL 00000	gent and title if applicable. (NOTE: FAND DIRECTORS   DELETE   DEL	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 4.1 TITLE 4.2 NAME 4.3 STREE 4.2 NAME 5.3 STREE 4.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY-G 6.1 TITLE 6.2 NAME	T ADDRESS ST-ZIP  ET ADDRESS ST-ZIP	ADDITIONS/CHANGES TO OFF	DATE CHANGE  Change  Change  Change	Addition  Addition  Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplier and accurate and that my signature shall have the same legal effect as if made under oath; that I am an indicated on this annual report or supplier and accurate and that my signature shall have the same legal effect as if made under oath; that I am an indicated on this annual report of the corporation of the

SIGNATURE: