## - 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 # 391461

D.B. TYLER & ASSOCIATES, INC.

| <b>FILED</b>        |
|---------------------|
| Feb 12, 1999 8:00am |
| Secretary of State  |

02-12-1999 90015 020 \*\*\*158.75



| Principal Place   | e of Business  | Mailing Address  |   |  |  | CAMBINE \$111 N 18181 CONT. P.   |                       |  | 11011 01011 1001                                       |  |
|---|--|--|---|--|--|--|-----------------------|--|--|--|
| 2500 E HALLAN   | NDALE BLVD   | P.O. BOX 1028  | P.O. BOX 1028   |  |  |  |                       |  |  |  |
| 407G  |  | HALLANDALE FL 33009  |   |  | ļ  | DO NOT WRITE IN THIS SPACE   |                       |  |  |  |
| HALLANDALE F  | FL 33009   | US   |   |  |  |  |                       | HIS SPACE  |  |  |
| US  |  |  |   |  | e, .   | 3. Date Incorporated or Qua  |                       | <u> </u>   |  |  |
| 2. Principal P  | Place of Business  | 2a. Mailing Address  |   |  |  | 4. FEI Number  |                       | Ap   | plied For  |  |
| 21  |  | 26   | 26  |  |  | 59-1377195   |                       |  | t Applicable   |  |
| Suite, Apt. #, etc.   |  | Suite, Apt. #, etc.  | <b>⊢</b>  |  |  | 5. Certifcate of Status Desire   | »d 💢                  | \$8.75 /<br>Fee Re                                   | Additional equired                                     |  |
| City & State  |  | City & State   |   |  |  | 6. Election Campaign Finan   | cing [7]              | \$5.00   | May Be   |  |
| 23  |  | 28   |   |  |  | Trust Fund Contribution  |                       | Added  | to Fees  |  |
| Zip   | Country 25   | Zip  | Zip Country   |  |  | 8. This corporation owes the current year Intangible Personal Property Tax. Yes No |                       |  |  |  |
| 24  | 9. Name and Address of Cur   |  | 1001  |  |  | 10. Name and Address of N  | ew Registe            | red Agent  |  |  |
|   | •  |  | 8   | 1 N  | Name   |  |                       |  | 1  |  |
|   | er,dorothy   |  |   | 2 S  | Stroot Addres  | ss (P.O. Box Number is Not Ac  | centable)             | · ·  |  |  |
|   | NE 26 AVE.   |  | · L   |  |  |  |                       | **. *** * \$65 - *.<br>*5. (1) **. \$689 379 11      | 18 1 1 2 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2               |  |
| MALI  | LANDALE FL 33009   |  | 8   |  |  |  |                       |  |  |  |
|   |  |  |   |  | City   | * * *  | ĺ                     | FL   | Code '   |  |
| : office or r   | to the provisions of Sections 607.   | ate of Florida. Such change was a  | autnoriz <del>e</del> a d   | ov ine   | amed corpor<br>e corporation   | ration submits this statement to<br>i's board of directors. I hereby               | accept the a          | ppointment as re                                     | gistered   |  |
| : office or r   | registered agent, or both, in the Sta<br>am familiar with, and accept the ob   | ate of Florida. Such change was a<br>ligations of, Section 607.0505, Flo   | orida Statute   | y tne<br>es.   | e corporation  | when reinstating)  | DAT                   | E  |  |  |
| office or r<br>agent. I a   | registered agent, or both, in the Stan familiar with, and accept the ob  Signature, typed or printed name of registered  | ate of Horida. Such change was a<br>ligations of, Section 607.0505, Fix<br>agent and title if applicable. (NOTE<br>AND DIRECTORS             | E: Registered Ag  | es.<br>Jent sign   | e corporation  | when reinstating)  | DAT                   | E<br>S AND DIRECTO                                   | DRS IN 12  |  |
| office or r<br>agent. I a<br>SIGNATURE  | registered agent, or both, in the Stam familiar with, and accept the ob  Signature, typed or printed name of registered  OFFICERS  DP  | ate of Florida. Such change was a ligations of, Section 607.0505, Floridation agent and title if applicable.  (NOTE                          | eutnorized b<br>orida Statute   | es.<br>Jent sign   | e corporation  | when reinstating)  | DAT                   | E  |  |  |
| office or r<br>agent. I a<br>SIGNATURE  | registered agent, or both, in the Stam familiar with, and accept the ob  Signature, typed or printed name of registered  OFFICERS  DP  TYLER, DOROTHY                                | ate of Horida. Such change was a<br>ligations of, Section 607.0505, Fix<br>agent and title if applicable. (NOTE<br>AND DIRECTORS             | E: Registered Ag  | es.  | e corporation  | when reinstating)  | DAT                   | E<br>S AND DIRECTO                                   | DRS IN 12  |  |
| office or r<br>agent. I a<br>SIGNATURE  | registered agent, or both, in the Stam familiar with, and accept the ob  Signature, typed or printed name of registered  OFFICERS  DP  TYLER, DOROTHY  937 NE 26 AVE.                | ate of Horida. Such change was a<br>ligations of, Section 607.0505, Fix<br>agent and title if applicable. (NOTE<br>AND DIRECTORS             | E: Registered Ag  | es.<br>pent sign   | gnature required v   | when reinstating)  | DAT                   | E<br>S AND DIRECTO                                   | DRS IN 12  |  |
| office or r<br>agent. I a<br>SIGNATURE<br>12.<br>TITLE<br>NAME  | registered agent, or both, in the Stam familiar with, and accept the ob  Signature, typed or printed name of registered  OFFICERS  DP  TYLER, DOROTHY                                | ate of Horida. Such change was a ligations of, Section 607.0505, Fix agent and title if applicable.  AND DIRECTORS  DELETE                   | E: Registered Ag  13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY-   | es.  Gent sign  E  E  T  ST-ZIF  | gnature required v   | when reinstating)  | DAT                   | E<br>S AND DIRECTO                                   | DRS IN 12  |  |
| office or ragent. I a SIGNATURE  12.  TITLE NAME STREET ADDRESS   | registered agent, or both, in the Stam familiar with, and accept the ob  Signature, typed or printed name of registered  OFFICERS  DP  TYLER, DOROTHY  937 NE 26 AVE.                | ate of Horida. Such change was a<br>ligations of, Section 607.0505, Fix<br>agent and title if applicable. (NOTE<br>AND DIRECTORS             | E: Registered Ag  13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE   | gent sign  | gnature required v   | when reinstating)  | DAT                   | E<br>S AND DIRECTO                                   | DRS IN 12  |  |
| office or ragent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP  | registered agent, or both, in the Stam familiar with, and accept the ob  Signature, typed or printed name of registered  OFFICERS  DP  TYLER, DOROTHY  937 NE 26 AVE.                | ate of Horida. Such change was a ligations of, Section 607.0505, Fix agent and title if applicable.  AND DIRECTORS  DELETE                   | E: Registered Ag  13. 1.1 TITLE 12 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME   | gent sign E E ET ADD -ST-ZIF   | gnature required v   | when reinstating)  | DAT                   | E<br>S AND DIRECTO                                   | DRS IN 12  |  |
| office or ragent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE  | registered agent, or both, in the Stam familiar with, and accept the ob  Signature, typed or printed name of registered  OFFICERS  DP  TYLER, DOROTHY  937 NE 26 AVE.  HALLANDALE FL | ate of Horida. Such change was a ligations of, Section 607.0505, Fix agent and title if applicable.  AND DIRECTORS  DELETE                   | E: Registered Ag  13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE   | gent sign E E ET ADD -ST-ZIF   | gnature required v   | when reinstating)  | DAT                   | E<br>S AND DIRECTO                                   | DRS IN 12  |  |
| office or ragent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME   | registered agent, or both, in the Stam familiar with, and accept the ob  Signature, typed or printed name of registered  OFFICERS  DP  TYLER, DOROTHY  937 NE 26 AVE.  HALLANDALE FL | ate of Horida. Such change was a ligations of, Section 607.0505, Fix agent and title if applicable. (NOTE AND DIRECTORS DELETE               | E: Registered Ag  13. 1.1 TITLE 12 NAME 1.3 STRE 14 CITY- 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY  | gent sign E E ET ADD -ST-ZIF E EET ADD (-ST-ZIF  | gnature required v   | when reinstating)  | DAT                   | E S AND DIRECTO ☐ Change ☐ Change                    | DRS IN 12 Addition                                     |  |
| office or ragent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS  | registered agent, or both, in the Stam familiar with, and accept the ob  Signature, typed or printed name of registered  OFFICERS  DP  TYLER, DOROTHY  937 NE 26 AVE.  HALLANDALE FL | ate of Horida. Such change was a ligations of, Section 607.0505, Fix agent and title if applicable.  AND DIRECTORS  DELETE                   | E: Registered Ag  13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE  | es.  Gent sign  E  E  ST-ZIF  E  E  E  C-ST-ZIF  E  E  C-ST-ZIF  | gnature required v   | when reinstating)  | DAT                   | E<br>S AND DIRECTO                                   | DRS IN 12  |  |
| office or r agent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME TITLE NAME   | registered agent, or both, in the Stam familiar with, and accept the ob  Signature, typed or printed name of registered  OFFICERS  DP  TYLER, DOROTHY  937 NE 26 AVE.  HALLANDALE FL | ate of Horida. Such change was a ligations of, Section 607.0505, Fix agent and title if applicable. (NOTE AND DIRECTORS DELETE               | E: Registered Ag  13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAME  | ent sign  E  E  E  E  E  E  E  E  E  E  E  E  E  | pnature required v   | when reinstating)  | DAT                   | E S AND DIRECTO ☐ Change ☐ Change                    | DRS IN 12 Addition                                     |  |
| office or r agent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE   | registered agent, or both, in the Stam familiar with, and accept the ob  Signature, typed or printed name of registered  OFFICERS  DP  TYLER, DOROTHY  937 NE 26 AVE.  HALLANDALE FL | ate of Horida. Such change was a ligations of, Section 607.0505, Fix agent and title if applicable. (NOTE AND DIRECTORS DELETE               | E: Registered Ag  13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STRE   | ey the   | poperation of the population o | when reinstating)  | DAT                   | E S AND DIRECTO ☐ Change ☐ Change                    | DRS IN 12 Addition                                     |  |
| office or r agent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP STREET ADDRESS CITY-ST-ZIP  | registered agent, or both, in the Stam familiar with, and accept the ob  Signature, typed or printed name of registered  OFFICERS  DP  TYLER, DOROTHY  937 NE 26 AVE.  HALLANDALE FL | ate of Horida. Such change was a ligations of, Section 607.0505, Fix agent and title if applicable. (NOTE AND DIRECTORS DELETE DELETE        | E: Registered Ag  13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY- 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STRE 3.4 CITY 4.4 CITY 4.5 STRE 4.5 STRE 5.4 CITY 5.4 CITY 5.5 STRE 5.4 CITY 5.7 STRE 5.7 | y the eyes.  E E E E E E E E E E E E E E E E E E   | poperation of the population o | when reinstating)  | DATIO DATION OFFICERS | E S AND DIRECTO ☐ Change ☐ Change                    | DRS IN 12 Addition Addition                            |  |
| office or r agent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE   | registered agent, or both, in the Stam familiar with, and accept the ob  Signature, typed or printed name of registered  OFFICERS  DP  TYLER, DOROTHY  937 NE 26 AVE.  HALLANDALE FL | ate of Horida. Such change was a ligations of, Section 607.0505, Fix agent and title if applicable. (NOTE AND DIRECTORS DELETE               | E: Registered Ag  13.  1.1 TITLE  1.2 NAME  1.3 STRE  1.4 CITY  2.1 TITLE  2.2 NAME  2.3 STRE  2.4 CITY  3.1 TITLE  3.2 NAME  3.3 STRE  3.4 CITY  4.1 TITLE   | ey the eyes.  E E E E E E E E E E E E E E E E E E  | poperation of the population o | when reinstating)  | DATIO DATION OFFICERS | E S AND DIRECTC  ☐ Change  ☐ Change                  | DRS IN 12 Addition Addition                            |  |
| office or r agent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME  | registered agent, or both, in the Stam familiar with, and accept the ob  Signature, typed or printed name of registered  OFFICERS  DP  TYLER, DOROTHY  937 NE 26 AVE.  HALLANDALE FL | ate of Horida. Such change was a ligations of, Section 607.0505, Fix agent and title if applicable. (NOTE AND DIRECTORS DELETE DELETE        | E: Registered Ag  13.  1.1 TITLE  1.2 NAME  1.3 STRE  1.4 CITY  2.1 TITLE  2.2 NAME  2.3 STRE  2.4 CITY  3.1 TITLE  3.2 NAME  3.3 STRE  4.1 TITLE  4.2 NAME   | y the ees.  EET ADD  -ST-ZIF  E  E  EET ADT  (-ST-ZIF  E  E  E  E  E  E  E  E  E  E  E  E  E   | population of the population o | when reinstating)  | DATIO DATION OFFICERS | E S AND DIRECTC  ☐ Change  ☐ Change                  | DRS IN 12 Addition Addition                            |  |
| office or r agent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS   | registered agent, or both, in the Stam familiar with, and accept the ob  Signature, typed or printed name of registered  OFFICERS  DP  TYLER, DOROTHY  937 NE 26 AVE.  HALLANDALE FL | ate of Horida. Such change was a ligations of, Section 607.0505, Fix agent and title if applicable. (NOTE AND DIRECTORS DELETE DELETE        | E: Registered Ag  13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STRE 3.4 CITY 4.1 TITLE 4.2 NAM 4.3 STRE 4.2 NAM 4.3 STRE  | y the eest ADC - ST-ZIF E E EET ADC (-ST-ZIF E E E E E T ADC (-ST-ZIF E E E E E E T ADC (-ST-ZIF E E E E E E T ADC (-ST-ZIF E E E E E E E E E E E E E E E E E E E  | poperation of the poperation o | when reinstating)  | DATIO DATION OFFICERS | E S AND DIRECTC  ☐ Change  ☐ Change                  | DRS IN 12 Addition Addition                            |  |
| office or r agent. I a SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP  | registered agent, or both, in the Stam familiar with, and accept the ob  Signature, typed or printed name of registered  OFFICERS  DP  TYLER, DOROTHY  937 NE 26 AVE.  HALLANDALE FL | ate of Horida. Such change was a ligations of, Section 607.0505, Fix agent and title if applicable. (NOTE AND DIRECTORS DELETE DELETE        | E: Registered Ag  13.  1.1 TITLE  1.2 NAME  1.3 STRE  1.4 CITY  2.1 TITLE  2.2 NAME  2.3 STRE  2.4 CITY  3.1 TITLE  3.2 NAME  3.3 STRE  4.1 TITLE  4.2 NAM  4.3 STRE  4.4 CITY  4.1 STRE  4.4 CITY  4.4 CITY  | yent sign  E E E E E E E E E E E E E E E E E E   | poperation of the poperation o | when reinstating)  | DATIO DATION OFFICERS | E S AND DIRECTC  ☐ Change  ☐ Change                  | DRS IN 12 Addition Addition Addition                   |  |
| office or ragent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME   | registered agent, or both, in the Stam familiar with, and accept the ob  Signature, typed or printed name of registered  OFFICERS  DP  TYLER, DOROTHY  937 NE 26 AVE.  HALLANDALE FL | ate of Horida. Such change was a ligations of, Section 607.0505, Fix agent and title if applicable. (NOTE AND DIRECTORS DELETE DELETE        | E: Registered Ag  13. 1.1 TITLE 1.2 NAME 1.3 STRE 1.4 CITY 2.1 TITLE 2.2 NAME 2.3 STRE 2.4 CITY 3.1 TITLE 3.2 NAME 3.3 STRE 3.4 CITY 4.1 TITLE 4.2 NAM 4.3 STRE 4.2 NAM 4.3 STRE  | y the east sign and the sign an | poperation of the poperation o | when reinstating)  | DATIO DATION OFFICERS | E S AND DIRECTC  ☐ Change ☐ Change ☐ Change ☐ Change | DRS IN 12 Addition Addition Addition                   |  |
| office or ragent. I a SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME  | registered agent, or both, in the Stam familiar with, and accept the ob  Signature, typed or printed name of registered  OFFICERS  DP  TYLER, DOROTHY  937 NE 26 AVE.  HALLANDALE FL | ate of Horida. Such change was a ligations of, Section 607.0505, Fix agent and title if applicable. (NOTE AND DIRECTORS DELETE DELETE        | E: Registered Ag  13.  1.1 TITLE  1.2 NAME  1.3 STRE  1.4 CITY  2.1 TITLE  2.2 NAME  2.3 STRE  2.4 CITY  3.1 TITLE  3.2 NAME  3.3 STRE  4.1 TITLE  4.2 NAM  4.3 STRE  4.4 CITY  5.1 TITLE   | y the eas.  E E E E E E E E E E E E E E E E E E  | porture required v  DORESS  DORESS  DORESS  DORESS  DORESS  DORESS   | when reinstating)  | DATIO DATION OFFICERS | ESAND DIRECTC Change Change                          | DRS IN 12 Addition Addition Addition                   |  |
| office or ragent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS                              | registered agent, or both, in the Stam familiar with, and accept the ob  Signature, typed or printed name of registered  OFFICERS  DP  TYLER, DOROTHY  937 NE 26 AVE.  HALLANDALE FL | ate of Horida. Such change was a ligations of, Section 607.0505, Fix agent and title if applicable. (NOTE AND DIRECTORS DELETE DELETE        | E: Registered Ag  13.  1.1 TITLE  1.2 NAME  1.3 STRE  1.4 CITY  2.1 TITLE  2.2 NAME  2.3 STRE  2.4 CITY  3.1 TITLE  3.2 NAME  3.3 STRE  4.1 TITLE  4.2 NAM  4.3 STRE  4.4 CITY  5.1 TITLE  5.2 NAMI   | pent sign  E  E  E  E  E  E  E  E  E  E  E  E  E   | poperation of the poperation o | when reinstating)  | DATIO DATION OFFICERS | E S AND DIRECTC  ☐ Change ☐ Change ☐ Change ☐ Change | DRS IN 12 Addition Addition Addition                   |  |
| office or ragent. I a SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME      | registered agent, or both, in the Stam familiar with, and accept the ob  Signature, typed or printed name of registered  OFFICERS  DP  TYLER, DOROTHY  937 NE 26 AVE.  HALLANDALE FL | ate of Horida. Such change was a ligations of, Section 607.0505, Fix agent and title if applicable. (NOTE AND DIRECTORS DELETE DELETE        | E: Registered Ag  13.  1.1 TITLE  1.2 NAME  1.3 STRE  2.1 TITLE  2.2 NAME  2.3 STRE  2.4 CITY  3.1 TITLE  3.2 NAME  3.3 STRE  4.1 TITLE  4.2 NAM  4.3 STRE  4.4 CITY  5.1 TITLE  5.2 NAMI  5.3 STRE   | y the eas.  E E EET ADD  C-ST-ZIF  E E E E E E E E E E E E E E E E E E E  | poperation of the poperation o | when reinstating)  | DATIO DATION OFFICERS | E S AND DIRECTC  ☐ Change ☐ Change ☐ Change ☐ Change | DRS IN 12 Addition Addition Addition                   |  |
| office or ragent. I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME | registered agent, or both, in the Stam familiar with, and accept the ob  Signature, typed or printed name of registered  OFFICERS  DP TYLER, DOROTHY 937 NE 26 AVE. HALLANDALE FL    | ate of Horida. Such change was a ligations of, Section 607.0505, Fix agent and title if applicable. (NOTE AND DIRECTORS DELETE DELETE DELETE | E: Registered Ag  13.  1.1 TITLE  1.2 NAME  1.3 STRE  2.1 TITLE  2.2 NAME  2.3 STRE  2.4 CITY  3.1 TITLE  3.2 NAME  3.4 CITY  4.1 TITLE  4.2 NAM  4.3 STRE  4.4 CITY  5.1 TITLE  5.2 NAMI  5.3 STRE  5.4 CITY  5.3 STRE   | pent sign  E E E E E E E E E E E E E E E E E E   | poperation of the poperation o | when reinstating)  | DATIO DATION OFFICERS | ESAND DIRECTO Change Change Change                   | DRS IN 12 Addition Addition Addition Addition Addition |  |
| office or ragent. I a SIGNATURE  12.  TITLE NAME STREET ADDRESS CITY-ST-ZIP                 | registered agent, or both, in the Stam familiar with, and accept the ob  Signature, typed or printed name of registered  OFFICERS  DP  TYLER, DOROTHY  937 NE 26 AVE.  HALLANDALE FL | ate of Horida. Such change was a ligations of, Section 607.0505, Fix agent and title if applicable. (NOTE AND DIRECTORS DELETE DELETE DELETE | E: Registered Ag  13.  1.1 TITLE  1.2 NAME  1.3 STRE  1.4 CITY  2.1 TITLE  2.2 NAME  2.3 STRE  2.4 CITY  3.1 TITLE  3.2 NAME  3.3 STRE  4.1 TITLE  4.2 NAME  4.3 STRE  4.1 TITLE  5.1 TITLE  5.2 NAMI  5.3 STRE  5.4 CITY  6.1 TITLE  5.4 CITY  6.1 TITLE   | pent sign  E  E  E  E  E  E  E  E  E  E  E  E  E   | poperation of the poperation o | when reinstating)  | DATIO DATION OFFICERS | ESAND DIRECTO Change Change Change                   | DRS IN 12 Addition Addition 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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: