## 3/30/983-3873-0 FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

**PROFIT CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

		1998	0111		12	DIVISION OF	CORPORA		NS		Secreta	ary	01 51	tate
D.	OCUN Corporation EDWARD			33232	2	(6)								
Pri	ncipal Place	of Busines	s		M	ailing Address		_						
41	60 NW 1ST	AVE #18				60 NW 1ST AVE #18								
BC	CA RATON	FL 33431			В	OCA RATON FL 33431					DO NOT WRI	TE IN TH	IS SPACE	
										Ì	3. Date Incorporated or Qualified			
											08/16/1973			
_	Principal Pla	ace of Busin	iess		<u> </u>	Mailing Address					4. FEI Number		<del></del>	oplied For
Suite, Apt. #, etc.					20	Suite, Apt. #, etc.					59-1486405			ot Applicable  Additional
22					27	——————————————————————————————————————					5. Certificate of Status Desired		,	equired
	City & State					City & State	·				6. Election Campaign Financing	-		May Be
23	Zip	<del></del>	Countr		[28]	Zip	Cour	ntru			Trust Fund Contribution	<u> </u>		to Fees
24	ΣIP	ŀ	25	y	29	Σip	30	юу		Į	<ol> <li>This corporation owes or has personal Property Tax due Jui</li> </ol>			tangible 
				ss of Curren		tered Agent					10. Name and Address of New F		d Agent	
		ER (JO AI						81	Name					
		N. E. 4 S						82	Street	Addres	s (P.O. Box Number is Not Accept	able)		
	800	A RATON	FL 33432	!			ŀ	83						
							L							<u> </u>
								84	City			F	L 65 Zip	Code
11.	Pursuant to	the provis	ions of Sec	tions 607.050	2 and 6	07.1508, Florida Statu	tes, the ab	ove	-named	corpor	ation submits this statement for the n's board of directors. I hereby acc	purpose	of changing it	ts registered
	agent. Lan	gistered ag n <b>fam</b> iliar wi	th, and acc	ept the obliga	ations of	, Section 607.0505, F	lorida Stati	utes	the cor	poration	is board of directors, I hereby acc	ept the a	ppointment as	registered
SIG	NATURE 2					45	11. 5	<u>.                                    </u>			1		<del>,</del>	
12.		signature, types		of registried age			13.	Ager	nt signature	e required	when reinstating) ADDITIONS/CHANGES TO OFF	DATE		RS IN 12
TITL	1	PD				DELETE	1.1 TIT	LE		7				Addition
NAM	ŧ		<b>EDWARD</b>				1.2 NA	MĘ		MA	DER, EDWALD K.	JK	<b>'</b> •	
	ET ADDRESS		4TH STRE	ET					address	26	BN.B. A. ST.	***	l	
CITY	-ST-ZIP	BUCA R	ATON FL			DELETE	1.4 GfT 2.1 TIF		r-ZIP	10	DER, EDWALD R. BN.E. A. ST. BCA RATOD, FL	227	2 Change	☐ Addition
NAM	- 1	MEDER.	IO ANN				2.2 NA			ł			L_ Crimige	Rodillon
	ET ADDRESS	•	4TH STRE	ET					ADDRESS					
	-ST-ZIP		ATON FL				2. 4 CI	TY-S	1 - 71P	1				
TITL		-				DELETE	3.1 TIT	LE					Change	☐ Addition
NAM							3.2 NAI							
	ET ADDRESS								ADDRESS					
TITL	-ST-ZIP					DELETE	3.4. C0 4.1 TIT		1-212	<del> </del>			Change	Addition
NAM	i			ı			4. 2 NA			1				
STRE	ET ADDRESS						4.3 STF	REET	ADDRESS	ł				
CITY	-ST-ZIP						4.4 CIT	Y - \$1	- ZIP					
TITLI						DELETE	5.1 TIT						Change	Addition
NAM							5.2 NAI							
	ET ADDRESS						5.3 STF		ADDRESS					
TITLE	-S1-ZIP					DELETE	6.1 TIT		- Lir				☐ Change	Addition
NAM							6.2 NAI						_	
STRE	ET ADDRESS						6.3 STF	REET	ADDRESS					
	1						<b>1</b>			1				

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.

SIGNATURE:

**FILED** 

Mar 30 1998 8:00am