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PROFIT CORPORATION ANNUAL REPORT

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

FILED Jan 30 1998 8:00am

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| City & State City & Country City & Country City & State City & Country City & Count | | # etc | | | | 59-1502123 | | |
| City & State Country Zip Zip | | ", 6 10. | — · · · · | | | 5. Certificate of Status Desired | | |
| 20 | | 6 | | | | Election Campaign Financing | **** | |
| 9. Name and Address of Current Registered Agent SMITH, SAMUEL S. 407 UNCOUN RD. MIAMI BEACH FL 83 84 City FL 85 Sirved Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Sirved Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Sirved Address (P.O. Box Number is Not Acceptable) 85 Sirved Address (P.O. Box Number is Not Acceptable) 86 87 88 89 80 80 80 80 80 80 80 80 | 23 | | | | | | | |
| SMITH, SAMUEL S. 407 UNOOUN RD. MIAMI BEACH FL 82 Street Address (P.O. Box Number is Not Acceptable) 83 Circy FL 84 City FL 85 Zip Code 11. Pursuent to the provisions of Socions 607.0502 and 607.1508. Floride Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Floride. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent in familiar with, and accept the obligations of, Section 607 5055. Floride Statutes. SIGNATURE SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. THILE PLANCO, VINCENT M. 3843 PEMBROKE RD. 13. SIRRET ADDRESS CITY-ST-ZP HOLLYWOOD FL 14. CITY-ST-ZP HOLLYWOOD FL 15. STREET ADDRESS STREET | , · | ├ ─, ′ | - | | etry | | | 1 |
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| AND TUNCOUN RD. MIAM BEACH FL 82 Street Address (P.O. Box Number is Not Acceptable) 83 City FL 85 Zip Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes. The above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Statutes. SIGNATURE SIGNATURE Signature. Typed or provide name of registered agent and time 4 expirations. (ROTE Registered Agent signature registered when re-relaxing) OATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. TITLE PLANCO, VINCENT M. 3843 PEMBROKE RD. 13. SIRRET ADDRESS CITY-ST-ZP HOLLYWOOD FL 14. CITY-ST-ZP HOLLYWOOD FL 22. SIRRET ADDRESS CITY-ST-ZP TITLE DELETE 31. | CI | | ir uedisreiso võsur | | B1 Name | 10. Name and Address of New Registere | a Agent | |
| MIAM BEACH FL 83 84 City FL 85 27 Code 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the abover-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered office or registered agent, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE 85(SINATURE 85(SINATURE) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PLANCO, VINCENT M. 3440 PENBROKE RD. HOLLTWOOD FL 14 CITY-ST-2IP HOLLTWOOD FL 14 CITY-ST-2IP PLANCO, DANA L. 22 NAME 23 SIRECT ADDRESS CITY-ST-2IP HOLLTWOOD FL 14 CITY-ST-2IP 1701 DELETE 31 TITLE D D DELETE 31 TITLE D Change Addition NAME FABIAN, PERRY M. 590 W 50TH ST. MIAMI BCH. FL 34 City 15 STREET ADDRESS CITY-ST-2IP HOLLTWOOD FL 35 SIRECT ADDRESS CITY-ST-2IP TITLE D CHANGE 41 TITLE D CHANGE 41 TITLE C Change Addition NAME FABIAN, PERRY M. 590 W 50TH ST. MIAMI BCH. FL 34 City 15 SIRECT ADDRESS CITY-ST-2IP TITLE D CHANGE 41 TITLE D CHANGE 41 TITLE C Change Addition NAME STREET ADDRESS CITY-ST-2IP TITLE D CHANGE 41 TITLE D CHANGE 41 TITLE C Change Addition NAME STREET ADDRESS CITY-ST-2IP TITLE D CHANGE 51 TITLE C Change Addition NAME STREET ADDRESS CITY-ST-2IP TITLE C Change Addition NAME STREET ADDRESS CITY-ST-2IP TITLE C Change Addition Addition NAME STREET ADDRESS CITY-ST-2IP TITLE C Change Addition Addition Addition Addition Addition Change Addition Addition AME STREET ADDRESS CITY-ST-2IP TITLE C Change Addition Addition Addition AME STREET ADDRESS CITY-ST-2IP TITLE C Change Addition Addition Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Addition ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Addition ADDITIONS/CH | | | | | | | | |
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| Signature, Vipadi or protect parties of protection arms of registrerized agent and talled in processors of protection and or protection | agent. I a | m familiar with, and accept the oblig | ations of, Section 607.0505, Flor | rida Stat | utes. | | spe | gioloido |
| 12. | SIGNATURE | Standard by pointed name of registered any | ent and little if Applicable (NOTE: | Registered | Aneril signature regu | uited when se netating) DATE | | |
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| 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 path, that I am an | | ertify that the information supplied w | ith this filing does not qualify for | | | Section 119.07(3)(i), Florida Statutes. I further | certify that the in | nformation |

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