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| ANNU   | PORATION<br>JAL REPORT   |   | Secretar   | , Mortham<br>y of State  | Secreta   | ry of   | State  |
|  | 1997   |   | DIVISION OF C  | ORPORATIONS  | {   | 2   |  |
| OCUN<br>Compration   | MENT # 51  | 1601  | (7)  |  |   |   |  |
|  | RODUCTS OF BO  |   | ,  |  |   |   |  |
|  |  |   |  |  |   |   | NATI BIRTE INAT<br>Managana  |
| rincipal Prace of Business Ma  |  |   | Mailing Address  |  |   |   |  |
|  |  |   | 150 W. GLADES ROAD<br>BOCA RATON FL 33432-1605   |  |   |   |  |
| ••••••••   |  |   |  |  | 3. Date Incorporated or Qualified   | 3a. Date of La  | nt Banart  |
|  |  |   |  |  | 09/01/1976  | 02/06/199   |  |
| Principal Pl   | ace of Business  | 2a.<br>26   | Mailing Address  |  | 4. FEI Number<br>59-1686899   |   | Applied For<br>Not Applicable  |
| Suite, Apt   | #, otc   | 20  | Suite, Apt. #, etc.  | ·····  | 5. Certificate of Status Desired  | 1 1   | 5 Additional   |
| City & State   | 3  | 27  | City & State   |  | 6. Election Campaign Financing  | Fe  | e Required<br>00 May Be  |
|  |  | 28  | ·  |  | Trust Fund Contribution   |   | ded to Fees  |
| Zφ   | 25   | y<br>[29]   | Zip  | Country<br>30  | <ul> <li>8. This corporation has liability for in<br/>Florida Statutes</li> </ul>   | langible tax und<br>Yes 🚺 No  | er s. 199.032,   |
|  | 9, Name and Addra  | ss of Current Regist  | ered Agent   |  | 10. Name and Address of New Reg   |   |  |
|  | imiller, gregory<br>Ne lakeview terr   |   |  | 81 Name  |   |   |  |
|  | A RATON FL 33431   | 1   |  |  | ress (P.O. Box Number is Not Acceptabl  | e)<br>  |  |
|  |  |   |  | 83   |   |   |  |
|  |  |   |  | 84 City  |   | FL  | Zip Code   |
| office or to   | edistered adent or both  | i, in the State of Florid   | a Such change was a  | uthorized by the corpora   | tion's board of directors. I hereby accept  | the appointmen  | t as registered  |
| GNATURE  | Stphature, typed or printed name<br>O  |   | applicable (NO1)   | vida Statutes.<br>E Registered Agent signature requi   | poration submits this statement for the pution's board of directors. I hereby accept<br>ired when reinstating)<br>ADDITIONS/CHANGES TO OFFICE | DATE<br>ERS AND DIREC   | TORS IN 12   |
| GNATURE  | Stonature, typed or ponted name<br>O<br>VSTD   | e of registered agont and title i   | applicable {NO16   | E: Registered Agent signature requinations and the second se   | ired when reinstating)  | DATE  | TORS IN 12   |
| GNATURE  | Stphature, typed or printed name<br>O  | of registered agont and tide I<br>FFICERS AND DIREC   | applicable (NO1)   | E. Registered Agent signature requ<br>13.  | ired when reinstating)  | DATE<br>ERS AND DIREC   | TORS IN 12<br>nge Addilion   |
| GNATURE<br>LE<br>ME<br>HEFT ADDRESS<br>Y-ST-ZIP  | Stonature, typed or provide name<br>O<br>VSTD<br>RISLEY, DAVID L<br>150 W. GLADES RI<br>BOCA RATON, FL   | ed registered agont and life in FFICERS AND DIREC   |  | E: Registered Agent signalure requ<br>13.<br>1.1 TITLE<br>1.2 NAME<br>1.3 STREET ADDRESS<br>1.4 CITY-ST-ZIP  | ired when reinstating)  | DATE<br>ERS AND DIREC   | TORS IN 12<br>nge Addition   |
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