FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

· · · · · · · · · · · · · · · · · · ·	1996	Cap at 12.	Z DIVISION OF	CORPORATIONS			
DOCU 1. Corporation	MENT #	55419	6 (6)				
1 '	E. MERKLEIN,	INC.					
		1110) (DEJET BIJET BIJET BIJET BIJET II DE	PARIO BANCALINE BENER MENTE A	
Principal Place	of Business		A An You are A state of				
9603 NW 3			Mailing Address		i regies estel eitil diebt lifte	ranne ann arbit atelf bifit s	1811 81911 81811 1851
	RINGS FL 33065		9603 NW 36 MANOR CORAL SPRINGS FL				
0.00					3. Date Incorporated or Qualified 10/13/1977	3a. Date of Last I 06/12/	
21 SAW	ace of Business		2a. Mailing Address 26 12442 to	ires Rd	4. FLI Number		Applied For
Suite, Apt.		BILING	Suite, Apt. #, etc.	Ites Kul	59-1775707		Not Applicable
22		· · · · · · · · · · · · · · · · · · ·	27		5. Certificate of Status Desired	1 1	5 Additional Required
City & State	1		City & State	p	6. Election Campaign Financing	\$5.0	May Be
Zip	Coul	ntry	28 COANL SPA	Country FUN	Trust Fund Contribution	L.J Adde	d to Fees
24	25		29 33076	30 Brown	8. This corporation has liability for Florida Statutes	r intangible tax under s s □ No	199.032,
	9. Name and Add	Iress of Current R	legistered Agent		10. Name and Address of New I		
MEDIN	.EIN, JACK E.			81 Name			
	IW 36 MANOR			82 Street Add	fress (P.O. Box Number is Not Acceptal	ble)	
	. SPRINGS FL 330	65		83			
				1 7 1			
44 0				84 Gity			p Code
11. Pursuant to or registers	o the provisions of Se od agent, or both, in th	ctions 607,0502 and	d 607.1508, Florida Statute Such change was authorize		oration submits this statement for the pu	FL	
iairiilar witi	o the provisions of Se od agent, or both, in th n, and accept the obli	ctions 607,0502 and ne State of Florida. gations of, Section	d 607.1508, Florida Statute Such change was authorize 607.0509, Florida Statutes.		oration submits this statement for the pu and of directors. I hereby accept the app	FL	
SIGNATURE	o the provisions of Sei of agent, or both, in the n, and accept the obli ognature, typed or printed name	gations of, Section	607.0505, Florida Statutes.	s, the above named corpord by the corporation's boa	эээ эг энгээсэгэ. т ногару ассерт төг арр	rpose of changing its pointment as registered	
SIGNATURE S	n, and accept the obli	gations of, Section	607,0505, Florida Statutes. Inteli anylastik. (NOT IRECTORS		so when renstating)	rpose of changing its appointment as registered	registered office I agent. I am
SIGNATURE S	n, and accept the obji	gations of, Section or of registered agent and of OFFICERS AND DI	607.0505, Florida Statutes.	S, the above named corpo d by the corporation's boa the Registered Agent signature require	эээ эг энгээсэгэ. т ногару ассерт төг арр	rpose of changing its appointment as registered	registered office I agent. I am
SIGNATURE SIGNATURE NAME	Signature, typed or printed nam PD MERKLEIN, JA	gations of, Section in of registered agent and DI OFFICERS AND DI	607,0505, Florida Statutes. Inteli anylastik. (NOT IRECTORS	s, the above-named corporation's board by the corporation's board Frag stated Agent signature require 13. 1 1 TILE 1.2 NAME	so when renstating)	urpose of changing its a pointment as registered DATE	egistered office I agent. I am PRS IN 12
SIGNATURE S	n, and accept the obji	gations of, Section of registered eject and D OFFICERS AND D CK E. JANOR	607,0505, Florida Statutes. Inteli anylastik. (NOT IRECTORS	s, the above-named corpord by the corporation's boath Fig. stered Agent signature required. 13. 1 TITLE 1.2 NAME 1.3 STREET ADDRESS	so when renstating)	urpose of changing its a pointment as registered DATE	egistered office I agent. I am PRS IN 12
SIGNATURE 5 12. TITLE NAME STREET ADDRESS	PD MERKLEIN, JA 9603 NW 36 N	gations of, Section of registered eject and D OFFICERS AND D CK E. JANOR	607,0505, Florida Statutes. Inteli anylastik. (NOT IRECTORS	s, the above-named corporation's board by the corporation's board Frag stated Agent signature require 13. 1 1 TILE 1.2 NAME	so when renstating)	DATE Change	egistered office I agent. I am PRS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PD MERKLEIN, JA 9603 NW 36 N	gations of, Section of registered eject and D OFFICERS AND D CK E. JANOR	607.0505, Florida Statutes. Info if agg 4 अर्थमः (NOT IRECTORS	s, the above-named corpord by the corporation's boath in the corporation in	so when renstating)	urpose of changing its a pointment as registered DATE	egistered office I agent. I am PRS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS	PD MERKLEIN, JA 9603 NW 36 N	gations of, Section of registered eject and D OFFICERS AND D CK E. JANOR	607.0505, Florida Statutes. Info if agg 4 अर्थमः (NOT IRECTORS	s, the above-named corpord by the corporation's board by the corporation's board 13. 1 1 TITLE 1.2 NAME 1.3 SIREEL ADDRESS 1.4 CITY-S1-ZIP 2 1 TITLE	so when renstating)	DATE Change	egistered office I agent. I am PRS IN 12
SIGNATURE 12. 11/1LE NAME STREE1 ADDRESS CITY-SI-ZIP 11/1LE NAME STREET ADDRESS CITY-SI-ZIP 11/1LE NAME STREET ADDRESS CITY-SI-ZIP	PD MERKLEIN, JA 9603 NW 36 N	gations of, Section of registered eject and D OFFICERS AND D CK E. JANOR	607.0505, Florida Statutes. Info if aggs statute. (NOT IRECTORS DELETE	s, the above-named corpord by the corporation's board Agent signature require 13. 1 1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-S1-ZIP 2 1 TITLE 2 2 NAME 2 3 STREET ADDRESS 2.4 CITY-S1-ZIP	so when renstating)	DATE Change	egistered office I agent. I am PRS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS	PD MERKLEIN, JA 9603 NW 36 N	gations of, Section of registered eject and D OFFICERS AND D CK E. JANOR	607.0505, Florida Statutes. Info if agg 4 अर्थमः (NOT IRECTORS	s, the above-named corporation's board by the corporation's board 13. 1 1 TITLE 1.2 NAME 1.3 SIREET ADDRESS 1.4 CITY-S1-ZIP 2 1 TITLE 2.2 NAME 2.3 SIREET ADDRESS 2.4 CITY-S1-ZIP 3 1 TITLE	so when renstating)	DATE Change	egistered office I agent. I am PRS IN 12
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PD MERKLEIN, JA 9603 NW 36 N	gations of, Section of registered eject and D OFFICERS AND D CK E. JANOR	607.0505, Florida Statutes. Info if aggs statute. (NOT IRECTORS DELETE	s, the above named corporation's board by the corporation's board. 13. 1 **TITLE* 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-S1-ZIP 2 **TITLE* 2 2 NAME 2 3 STREET ADDRESS 2.4 CITY-S1-ZIP 3 1 TITLE 3 2 NAME	so when renstating)	DATE Change	egistered office lagent. Fam PRS IN 12 Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PD MERKLEIN, JA 9603 NW 36 N	gations of, Section of registered eject and D OFFICERS AND D CK E. JANOR	607.0505, Florida Statutes. Info if aggs statute. (NOT IRECTORS DELETE	s, the above named corpord by the corporation's board Agent squature require 13. 1 1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-S1-ZIP 2 1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-S1-ZIP 3 1 TITLE 3.2 NAME 3.3 STREET ADDRESS	so when renstating)	DATE Change	egistered office lagent. I am PRS IN 12 Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP CITY-ST-ZIP	PD MERKLEIN, JA 9603 NW 36 N	gations of, Section of registered eject and D OFFICERS AND D CK E. JANOR	607.0505, Florida Statutes. Info if aggs statute. (NOT IRECTORS DELETE	s, the above named corporation's board by the corporation's board. 13. 1 **TITLE* 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-S1-ZIP 2 **TITLE* 2 2 NAME 2 3 STREET ADDRESS 2.4 CITY-S1-ZIP 3 1 TITLE 3 2 NAME	so when renstating)	DATE Change Change	egistered office lagent. I am PRS IN 12 Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PD MERKLEIN, JA 9603 NW 36 N	gations of, Section of registered eject and D OFFICERS AND D CK E. JANOR	607.0505, Florida Statutes. INCO PRECIORS DELETE DELETE	s, the above named corpord by the corporation's board. 13. 1 1 TITLE 1.2 NAME 1.3 SIREET ADDRESS 1.4 CITY-S1-ZIP 2 1 TITLE 2.2 NAME 2.3 SIREET ADDRESS 2.4 CITY-S1-ZIP 3.1 TITLE 3.2 NAME 3.3 SIREET ADDRESS 3.4 CITY-S1-ZIP	so when renstating)	DATE Change	egistered office lagent. I am PRS IN 12 Addition Addition
SIGNATURE 12. TITLE NAME STREEI ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PD MERKLEIN, JA 9603 NW 36 N	gations of, Section of registered eject and D OFFICERS AND D CK E. JANOR	607.0505, Florida Statutes. INCO PRECIORS DELETE DELETE	s, the above named corpord by the corporation's board Agent squature require 13. 1 1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-S1-ZIP 2 1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-S1-ZIP 3 1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-S1-ZIP 4 1 TITLE	so when renstating)	DATE Change Change	egistered office lagent. I am PRS IN 12 Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MERKLEIN, JA 9603 NW 36 N	gations of, Section of registered eject and D OFFICERS AND D CK E. JANOR	607.0505, Florida Statutes. INCO PRESENTE DELETE DELETE	s, the above named corpord by the corporation's board by the corporation's board for the corporation's specific for the corporation of the corporati	so when renstating)	DATE Change Change	egistered office lagent. I am PRS IN 12 Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME STREET ADDRESS	PD MERKLEIN, JA 9603 NW 36 N	gations of, Section of registered eject and D OFFICERS AND D CK E. JANOR	607.0505, Florida Statutes. INCO PRECIORS DELETE DELETE	s, the above named corpord by the corporation's board by the corporation's board for t	so when renstating)	DATE Change Change	egistered office lagent. I am PRS IN 12 Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PD MERKLEIN, JA 9603 NW 36 N	gations of, Section of registered eject and D OFFICERS AND D CK E. JANOR	607.0505, Florida Statutes. INCO PRESENTE DELETE DELETE	s, the above named corpord by the corporation's board by the corporation's board agent signature required to the corporation's board agent signature required to the corporation's board agent signature required to the corporation of the corpo	so when renstating)	DATE CHANGE Change Change	egistered office lagent. I am PRS IN 12 Addition Addition Addition
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME NAME	PD MERKLEIN, JA 9603 NW 36 N	gations of, Section of registered eject and D OFFICERS AND D CK E. JANOR	607.0505, Florida Statutes. INCO PRESENTE DELETE DELETE	s, the above named corpord by the corporation's boal 13. 1 1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-S1-ZIP 2 1 TITLE 22 NAME 23 STREET ADDRESS 2.4 CITY-S1-ZIP 3 1 TITLE 32 NAME 3.3 STREET ADDRESS 3.4 CITY-S1-ZIP 4 1 TITLE 4 2 NAME 4 3 STREET ADDRESS 4.4 CITY-S1-ZIP 5 1 TITLE 5.2 NAME 5.3 STREET ADDRESS	so when renstating)	DATE CHANGE Change Change	egistered office lagent. I am PRS IN 12 Addition Addition Addition
SIGNATURE 12. TITLE NAME STREEI ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PD MERKLEIN, JA 9603 NW 36 N	gations of, Section of registered eject and D OFFICERS AND D CK E. JANOR	607.0505, Florida Statutes. INCO PRESENTE DELETE DELETE	s, the above named corpord by the corporation's board by the corporation's board agent signature required to the corporation's board agent signature required to the corporation's board agent signature required to the corporation of the corpo	so when renstating)	DATE DATE CHANGE Change Change Change	egistered office lagent. I am PRS IN 12 Addition Addition Addition Addition
SIGNATURE 12. TITLE NAME STREEI ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PD MERKLEIN, JA 9603 NW 36 N	gations of, Section of registered eject and D OFFICERS AND D CK E. JANOR	607.0505, Florida Statutes. Interioracy salar (NOT IRECTORS) DELETE DELETE DELETE	s, the above named corpo d by the corporation's boa 13. 1 1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-S1-ZIP 2 1 TITLE 2 NAME 2 3 STREET ADDRESS 2.4 CITY-S1-ZIP 3 1 TITLE 4 2 NAME 4 3 STREET ADDRESS 3.4 CITY-S1-ZIP 4 1 TITLE 4 2 NAME 4 3 STREET ADDRESS 5 4 CITY-S1-ZIP 5 1 TITLE 5 2 NAME 5 3 STREET ADDRESS 5 4 CITY-S1-ZIP	so when renstating)	DATE CHANGE Change Change	egistered office lagent. I am PRS IN 12 Addition Addition Addition
SIGNATURE 12. TITLE NAME STREEI ADDRESS CITY-S1-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PD MERKLEIN, JA 9603 NW 36 N	gations of, Section of registered eject and D OFFICERS AND D CK E. JANOR	607.0505, Florida Statutes. Interioracy salar (NOT IRECTORS) DELETE DELETE DELETE	s, the above named corpord by the corporation's boal 13. 1 1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-SI-ZIP 2 1 TITLE 2 NAME 2 3 STREET ADDRESS 2.4 CITY-SI-ZIP 3 1 TITLE 3 NAME 3.3 STREET ADDRESS 3.4 CITY-SI-ZIP 4 1 TITLE 4 2 NAME 4 3 STREET ADDRESS 3.4 CITY-SI-ZIP 5 1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-SI-ZIP 6.1 TITLE	so when renstating)	DATE DATE CHANGE Change Change Change	egistered office lagent. I am PRS IN 12 Addition Addition Addition Addition

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 appears in Block 12 or Block 13 if changed or on an attachment with an address.

SIGNATURE;

SKINA LAFE AND TREED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5-9-96 954.755.4730