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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # 631116 (1) 101 INDUSTRIES, INC.				ANN AFAN DIAN DIAN AHAN	.
	Mailing Address				
2063 BLOUNT RD. % WILSON B		RK BLVD. #601	Date Incorporated or Qualified	3a. Date of Last R	
				02/01/19	•
siness	2a. Mailing Address		4. FEI Number 59-1949716	┝┼	Applied For
	Suite, Apt. #, etc.			\$8.75	Not Applicable Additional
	27 Suite 40	5	5. Certificate of Status Desired	(30	Required
	City & State		Election Campaign Financing Trust Fund Contribution	1 1	0 May Be d to Fees
Country	Ζφ	Country	8. This corporation has liability for in		
25 29		[30]	Flonda Statutes 🔀 Yes		
ne and Address of Curre	int Registereo Agent	B1 Name	10. Name and Address of New Ro	egistereo Agent	
SON B JR. ND PARK BLVD., #601 .E FL 33306		83 2601 I	iess (P.O. Box Number is Not Acceptable E. Oakland Park Blvd.	, #405	
		84 City		FL 85 ZI	o Code
or both, in the State of Flo cept the obligations of, Sec	rida. Such change was authoriz htion 607,0505, Florida Statutes	ed by the corporation's boa i.	ration submits this statement for the purp ird of directors. I hereby accept the appo	oose of changing its r intment as registered	egistered office agent. I am
ega persona a canteren persona OFFICERS AN	rtanitum rapolinion (fil NO DIRECTORS	The Registrosel Agost signalism required. 13.	ad when reinstating) ADDITIONS/CHANGES TO OFFI	DATE CERS AND DIRECTO	RS IN 12
	DEL ETE	1 1 THUE		☐ Change	Addition Addition
T, SHIRLEY B.		1.2 NAME			
BLOUNT ROAD PANO BEACH FL		1.3 STHEET ADDRESS 1.4 CHY+ST+ZIP			
THE DESIGNATE	[] DECETE	2 1 TITLE		Change	Addition
T, DALE D.		2.2 NAME			
BLOUNT ROAD PANO BEACH FL		2.3 STREET ADDRESS 2.4 CITY - ST-ZIP			
ANO DEACHTE	☐ DELETE	3 1 TILE		Change	Addition
T, JOHN D.		3.2 NAME			
BLOUNT ROAD PANO BEACH FL		3.3 STREET ADDRESS			
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nati q n ir	ndicated on this an	ndicated on this annual report or supplemental ann	5 3 STREET ADDRESS 5 4 CITY-ST-ZIP [] DELETE 6 1 TITLE 6 2 NAME 6 3 STREET ADDRESS 6 4 CITY-ST-ZIP Information supplied with this filing is voluntarily furnished and does not qualify indicated on this annual report or supplemental annual report is true and accur	5 3 STREET ADDRESS 5 4 CITY - ST-ZIP [] DELETE 6 1 TITLE 6 2 NAME 6 3 STREET ADDRESS 6 4 CITY - ST-ZIP Information supposed with this filing is vountarily furnished and does not qualify for the exemption stated in Section 119.1 andicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the	5 3 STREET ADDRESS 5 4 CITY - ST - ZIP [] DELETE

SIGNATURE:

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/05/96

954/978-6425 De/line Phone #