1       26       Suite Apl I, etc       5       Certificate of Salus Delived       98.75 Additional         21       City & State       21       City & State       8. The Application       98.75 Additional         20       City & State       21       City & State       8. The Application       98.75 Additional         20       20       Country       21       21       Addet to Feet       8. The Application of Country       8. Addet to Feet         20       20       Country       20       Country       8. The Application of Country       8. The Application of Country       8. Addet to Feet         20       Street Address of New Registered Agent       10. Name and Address of New Registered Agent       10. Name and Address of New Registered Agent       10. Name and Address of New Registered Agent         20       Street Address of New Registered Agent       10. Name       10. Name and Address of New Registered Agent       10. Name         200       Street Address of New Registered Agent       10. Name       10. Name       10. Name       10. Name         200       Street Address of New Registered Agent       10. Name       10. Name       10. Name	CORPORATION         Secretary of State         98 NOV 16 PM 2: 27           ANNUAL REPORT         Secretary of State         Secretary of State           1998 '         DOCUMENT # 661354         SECRETARY OF STATE           C. Concrete         The Concrete         The Concrete           C. Concrete         Mailing Address         Processing         Name           C. Concrete         The Concrete         The Concrete         Secretary of State           C. Concrete         The Concrete         The Concrete         Secretary of State           Secretary of State         The Concrete         Secretary of State         Secretary of State           Secretary of State         The Concretary of State         Secretary of State         Secretary of State           Secretary of State         Secretary of State         Secretary of State         Secretary of State           Secretary of State         Secretary of State         Secretary of State         Secretary of State           Secretary of State         Secretary of State		SOLVED ON OR AFTER	SEPTEMBER 30, 1 UE TO REINSTATE: \$75		ED
1998 '       SECRE LARY OF STATE         DOCUMENT # 681354         Creation Programmers         Creation Programmers         Creation Programmers         Notice of Business         Concal gobies FL 331H         Concel gobies FL 331H         Control	1998 Devicion or componencies       SECRE LARY OF STATE TALLAMASSEE. FL DRIDA       Concention of Second Social Soc	CORPORATION			98 NOV 16	PH 2:27
DOCUMENT # 681354           C.recartive Programs, INC.           Proposel flace of Business           Proposel flace of Business           Proposel flace of Business           Proposel flace of Business           Do NOT Write IN THIS SPACE           Correct I gobbles FL 33IH           Do Box 14F 396           Correct I gobbles FL 33IH           Do Box 14F 396           Do Rot Write IN THIS SPACE           State Aplit A etc           Do Rot Write IN THIS SPACE           State Aplit A etc           Do Rot State Deside Correctly State Deside This Sta	DOCUMENT # 661354           Consortial Markings           Processible Market           Procesible Market			•	SECRETARY TALLAHASS	OF STATE
Créative Programs, INC.  Procedul Pierre d'Business PO Box 145396 Corol. gables FL B3114 PO Box 145396 Corol. gables FL B3114 Corol. gabl	Creative Programs, INC.  Propulations in the served business  Po Box 145396 Corol gables FL 3314  Po Box 14539  Po Box 145396  Po Box 14539  Po Box		ł			C. FLUMIDA
Ro Box 145 394 Coral Gables FL 33114       Fo Box 145 3946 Coral Gables FL 33114       Do Not WRITE IN this SPACE         2. Principal Place of Business       2a. Maling Address       4. Fel Number       On Not WRITE IN this SPACE         2. Principal Place of Business       2a. Maling Address       4. Fel Number       On Not WRITE IN this SPACE         3. Data Incorporated or Gualled       91/11/1800       Applied For       None Address of Common Space Interpole       State Applied For         3. Data Incorporated or Gualla Dealward       27       State Applied For       State Applied For       None Address of Common Space Interpole       State Space Interpole       State Space Interpole         3. Data Incorporation Corporation	Po Box       IHS 396 Concil gables       Po Box       IHS 396 Concil gables       Do NOT WRITE IN THIS SPACE         2. Data Incorporated or Qualities       2a. Maling Address       4. FEE Mumber	• _	с.			
Coral Gobles         FL         33/14         Coral Gobles         FL         35/11         Deter incorporation of County of Coun	Coral Gables         FL         33/14         Coral Gables         FL         30/14           2. Procloal Prace of Business         2.         Maing Acdress         -	Principal Place of Business	Mailing Address			
Corral Gables         FL         3311+         Corral Gables         FL         3011+           2.         Procloal Place of Business         2.         Maining Actress         4.         Pit Interference         911/14/14         Date incorporated of Countilled           2.         Procloal Place of Business         2.         Maining Actress         4.         Pit Interference         921/14/14         Pit Interference         921/14         Pit Interference         921/14 <td< td=""><td>Corral Gables         FL         33/14         Coral Gables         FL         30/14         Dub Not WRITE IN THIS SPACE           2. Principal Place of Busines         24. Maring Actress         4. FEI hunder         0/11/1820         1/10/1620         1/10/1620           2. Principal Place of Busines         24. Maring Actress         4. FEI hunder         1/10/1620         1/10/1620         1/10/1620           2. Maring Actress         21. Maring Actress         21. Maring Actress         5. Certificate of Studie Desile         1/10/1620         1/10/1620           20. Or 4 State         21. Trust Fund Condens Desile of the State Desile of the Carege Imangate Maring Actress of Current Registered Agent         10. Name and Address of Current Registered Agent         10. Name and Address of New Registered Agent         10. Name and Address of New Registered Agent           20. State Joint State Joint Desile State Actines of Current Registered Agent         10. Name and Address of New Registered Agent           20. State Address of Current Registered Agent<td>PO Box 145396</td><td>PO Box 1</td><td>+5396</td><td></td><td></td></td></td<>	Corral Gables         FL         33/14         Coral Gables         FL         30/14         Dub Not WRITE IN THIS SPACE           2. Principal Place of Busines         24. Maring Actress         4. FEI hunder         0/11/1820         1/10/1620         1/10/1620           2. Principal Place of Busines         24. Maring Actress         4. FEI hunder         1/10/1620         1/10/1620         1/10/1620           2. Maring Actress         21. Maring Actress         21. Maring Actress         5. Certificate of Studie Desile         1/10/1620         1/10/1620           20. Or 4 State         21. Trust Fund Condens Desile of the State Desile of the Carege Imangate Maring Actress of Current Registered Agent         10. Name and Address of Current Registered Agent         10. Name and Address of New Registered Agent         10. Name and Address of New Registered Agent           20. State Joint State Joint Desile State Actines of Current Registered Agent         10. Name and Address of New Registered Agent           20. State Address of Current Registered Agent <td>PO Box 145396</td> <td>PO Box 1</td> <td>+5396</td> <td></td> <td></td>	PO Box 145396	PO Box 1	+5396		
3. Date incorporate or Cualified     29/1/1/1980     4. FEI Number     20/1/2/11/1980     4. FEI Number     20/1/2/11/1980     4. FEI Number     20/1/2/11/1980     4. FEI Number     20/1/2/11/2/11/2/11     20/1/2/11/2/11/2/11/2/11/2/11/2/11/2	Source of Business     A Maing Actress     A Ref & or      A Debed For     Appled     Appled For	Coral gables FL 33114			DO NOT WRITE IN THI	S SPACE
De Procedi Proce of Business         2a. Malin Address         4. PER Numerical         Applied For ST-Sup4 Bacco         Applied For Not Applied For Procedification of Status Desired         Procedification         Proc	2. Principal Place of Businesis       2a. Maling Address       4. FE Number 100       Applied For 100         Suite. April etc       50.e. April etc       50.e. April etc       50.e. April etc       50.e. April etc         Suite. April etc       20.e. April etc       50.e. April etc       50.e. April etc       50.e. April etc         COV & State       COV & State       COV & State       5. Certificate of Status Desired       55.00 May Berl         COV & State       COV AState       COV AState       6. Election compatiple Financing       55.00 May Berl         20       COUNTY       20       COUNTY       8. This compatiple Financing       55.00 May Berl         20       20       COUNTY       8. This compatiple Financing       55.00 May Berl         20       20       COUNTY       8. This compatiple Financing       55.00 May Berl         20       20       COUNTY       8. This compatiple Financing       55.00 May Berl         20       Street Address (F.O. Box Number is Not Acceptable)       No       No         30.article and address of County is oblightered Againt       10       Name       10       Name         30.article and address of County is oblightered Againter of Store Address (F.O. Box Number is Not Acceptable)       10.e. File address       10.e. File address         30.art	4	7		3. Date incorporated or Qualified	· · · ·
Build: April # etc         State         State <td>Sume. Apr. #. etc         Set         Sume. Apr. #. etc         Set         Sume. Apr. #. etc         Set Association and the set and the currence of Suma Device         Part Association and Set and Se</td> <td></td> <td></td> <td></td> <td></td> <td></td>	Sume. Apr. #. etc         Set         Sume. Apr. #. etc         Set         Sume. Apr. #. etc         Set Association and the set and the currence of Suma Device         Part Association and Set and Se					
Suite, Ap. F. etc.     Suite, Ap. F. etc.     5. Certificate of Status Desked     \$3.75 Additional Fee Required       City, & State     City, & State     6. Bestion Campaign Financing     \$5.00 May Bail Tust Fund Contribution     Addet on Fees       Zip     Country     2ip     Country     8. This country was the analytic the current prever Inarghile Personal Proceetry and advances of New Registored Agent     10. Name and Address of Current Registored Agent       Lessner, Trans.     7.00     Bits Country     8. This country advances of New Registored Agent       11. Pursuant time provisions of Sections 607 0602 and 607. 1508, Florida Statules, the above-name d corporation subhits this statement for the pursues of changing in registered office or registered agent, or dotted finance, Such charge was applicable was advanced corporation subhits this statement for the pursues of changing in registered office or registered agent, or dotted finance, Such charge was applicable statement for the pursues of changing in registered office or registered agent, or dotted finance, Such charge was applicable statement for the pursues of changing in registered office or registered agent, or dotted finance, Such charge was applicable statement for the pursues of changing in registered office or registered agent, or dotted finance, Such charge was applicable statement for the pursues of charging in registered office or registered agent, or dotted finance, Such charge was applicable statement for the pursues of charging in registered office or space agent, or dotted finance, Such charge space applicable statement for the pursues of charge in registered office or space agent, or dotted finance, Such charge space applicable statement for thesplicable.       Stater Address, DP<	SUICE AD, If, etc			_		
Corr & State     Corr     Corr & State     Corr & State     Corr & State     Corr & St	COV & State     Covered State Desired     Covered State Des     Covered State Desired     Covered State Desired     C				···· /··· ··· ··· ··· ··· ··· ··· ··· ·	
2ip     2ip     Country     2ip     Country     2ip     Country     2ip     Country     8. This exportation over a this bala the current rest intensitie to rest intensitie to rest intensitie to rest intensitie to rest intensitie       2ip     2ip     2ip     Country     8. This exportation over a this bala the current rest intensitie to rest intensins intensitie to rest intensitie to rest intensitie to re	Image:	2	27	·		Fee Required
Image:	Image:	s[	28	Country	Trust Fund Contribution	Added to Fees
LESSTER, Thuil A.     81     Name       200 S Biscony AE Blub     Surk 2100       Minani FL 33131     83       Hi Pursuant to the provisions of Sections 607 0502 and 607, 1508, Florida Statules, the above-named comportation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida, Statules, the above-named comportation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida, Statules, the above-named comportation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida, Statules, the above-named comportations board of directors. Thereby accept the appointment as registered agent, or both, and accept the obligations of, Section 607, 5605, Florida Statules, and the above registered agent, or both, and accept the obligations of, Section 607, 5605, Florida Statutes, and the above registered agent, or both, and accept the obligations of, Section 607, 5605, Florida Statutes, and the above registered agent, or both, and accept the obligations of, Section 607, 5605, Florida Statutes, and the above registered agent, or both, and accept the obligations of, Section 607, 5605, Florida Statutes, and the above registered agent, or both, and the state as registered agent, or both, and the state and the above registered agent, or both, and the state agent, and the above registered agent, or both, and the state agent, and the above registered agent, or both, and the accept the appoint accept the appoint and the accept the accept the appoint accept	LESSTER, PAUL A.       81       Name         200 S Biscovy AE Divb       Surk 2100         Miani F L 33131       82         The provisions of Sections CV flood 2 and CVT is 08. Portida Statules, the above named corporation submits in the statement for the purpose of changing its registered agent. I and ambiat with, and accept the obligations of Section CV flood. Florida Statules, the above named corporation bacd of directors. Thereby accept the applications is registered agent. I and ambiat with, and accept the obligations of Section CV flood. Florida Statutes, thereby accept the applications is registered agent. I and ambiat with, and accept the obligations of Section CV flood. Florida Statutes, thereby accept the applications is registered agent. I and ambiat with, and accept the obligations of Section CV flood. Florida Statutes, thereby accept the applications is registered agent. I and ambiat with, and accept the obligations of Section CV flood. Florida Statutes, thereby accept the applications is registered agent. I and ambiat with, and accept the obligations of Section CV flood. Florida Statutes, thereby accept the applications is registered agent. I and ambiat with, and accept the obligations of Section CV flood. Florida Statutes, thereby accept the applications is registered agent. I and accept the applications is registered agent. I and accept the obligations of Section CV flood. Florida Statutes, thereby accept the applications is a statement of the statement of the obligations. I hereby accept the applications is a statement of the obligations. I hereby accept the applications is a statement of the obligations. I hereby accept the applications is a statement of the obligations. I hereby accept the applications is a statement of the obligations. I hereby accept the applications is a statement of the obligations. I hereby accept thereby accept thereby accept t	1 25	29	·	Personal Property Tax due June 30.	Yes No
Surke 2100       Aiani FL 33/31       Bit Aiani FL 33/31         Hiani FL 33/31       Bit Aiani FL 33/31       Bit Aiani FL 33/31         Historic Construction and Sections 607 0502 and 607 1508. Florida Statutes, the above-nomed corporation submits this statement for the purpose of change to a purpose of points of social of points of points above nomed corporation submits this statement for the purpose of change to a purpose of points of poin	Surk       2100       Aiani       FL       33/31         Hiani       FL       33/31       ad       City       FL       Statutes       Statutes       FL       Statutes       FL       Statutes       Statutes       FL       Statutes       FL       Statutes       Stat			81 Name		
Hisn.i       FL       33/31         Hisn.i       FL       33/31         Hisn.i       FL       33/31         Hisn.i       FL       33/31         Hisn.i       FL       32/20         Hisn.i       FL       50/20       FL         Status       FL       FL       FL         Status       FL       FL       FL       FL         Status       FL       FL       FL       FL       FL         Status       FL       FL       FL       FL       FL       FL         Status       FL       FL <td< td=""><td>Hian:       FL       33/31         Hian:       FL       65       Zip Code         It. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statules, the above-named corporation's ubmits this statement for the uppose of changing its registered agent, and accept the objection 607.0502. Florida Statules, the above-named corporation's board of directors. I hereby accept the appointment is registered agent, and annual with, and accept the objection 607.0502. Florida Statules, the corporation's board of directors. I hereby accept the appointment is registered agent, and accept the objection 607.0502. Florida Statules, the corporation's board of directors. I hereby accept the appointment is registered agent, and accept the objective types of provide statutes.         Distribution of mouth and of mouther of mouther of mouther appointment and mouther appointment and mouther of mouther appointment and mouther appointment appointment and mouther appointment and mouther appointment appointment and mouther appointment ap</td><td></td><td></td><td></td><td>Address (P.O. Box Number is Not Acceptable)</td><td></td></td<>	Hian:       FL       33/31         Hian:       FL       65       Zip Code         It. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statules, the above-named corporation's ubmits this statement for the uppose of changing its registered agent, and accept the objection 607.0502. Florida Statules, the above-named corporation's board of directors. I hereby accept the appointment is registered agent, and annual with, and accept the objection 607.0502. Florida Statules, the corporation's board of directors. I hereby accept the appointment is registered agent, and accept the objection 607.0502. Florida Statules, the corporation's board of directors. I hereby accept the appointment is registered agent, and accept the objective types of provide statutes.         Distribution of mouth and of mouther of mouther of mouther appointment and mouther appointment and mouther of mouther appointment and mouther appointment appointment and mouther appointment and mouther appointment appointment and mouther appointment ap				Address (P.O. Box Number is Not Acceptable)	
In Pursuant to the provisions of Section 607 0502 and 607 1508, Florida Statutes, the above named corporation submits this statement for the purpose of change is registered agent, and accept the obligations of, Section 607 0505, Florida Statutes, the above named corporation's board of directors. I hereby accept the appointment is registered agent, and accept the obligations of, Section 607 0505, Florida Statutes, and accept the obligations of, Section 607 0505, Florida Statutes, and accept the obligations of, Section 607 0505, Florida Statutes, and accept the obligations of, Section 607 0505, Florida Statutes, and accept the obligations of, Section 607 0505, Florida Statutes, and accept the obligations of, Section 607 0505, Florida Statutes, and accept the obligations of, Section 607 0505, Florida Statutes, and accept the obligations of, Section 607 0505, Florida Statutes, and accept the obligations of, Section 607 0505, Florida Statutes, and accept the obligations of, Section 607 0505, Florida Statutes, and accept the obligations of, Section 607 0505, Florida Statutes, and accept the obligations of, Section 607 0505, Florida Statutes, and accept the obligations of, Section 607 0505, Florida Statutes, and accept the obligations of, Section 607 0505, Florida Statutes, and accept the obligations of, Section 607, Statutes, and accept the obligation of, Section 607, Statutes, and	In Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statutes, the above-named consortion submits this statement for the pursues of change is registered agent, and accept the objections of Section 607 0502, Florida Statutes, the corporation's board of directors. I hereby accept the appointment is registered agent, and accept the objections 607 0505, Florida Statutes, and accept the objections of Section 607 0505, Florida Statutes, and accept the objections of Section 607 0505, Florida Statutes, and accept the objections of Section 607 0505, Florida Statutes, and accept the objections of Section 607 0505, Florida Statutes, and accept the objections of Section 607 0505, Florida Statutes, and accept the objections of Section 607 0505, Florida Statutes, and accept the objection 607 0507, Florida Statutes, and accept the objection for acception objection 607 0507, Florida Statutes, and acception objection 607 0507, Florida Statutes, and acception objection for acception objection for acception objection for acception objection for acception objection acception fore objection for acception objection for accep					
IT. Pursuant to the provisions of Sections 607 0502 and 607 1509. Portfal Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. Lam familiar with, and accept the obligations of, Section 607 0505, Florida Statutes, statement for the purpose of changing its registered agent. Lam familiar with, and accept the obligations of, Section 607 0505, Florida Statutes, statement for the purpose of changing its registered agent. Lam familiar with, and accept the obligations of, Section 607 0505, Florida Statutes, statement for the purpose of changing its registered agent with and accept the obligations of, Section 607 0505, Florida Statutes, statement for the purpose of changing its registered agent. Lam familiar with, and accept the obligations of, Section 607 0505, Florida Statutes, statement for the purpose of changing its registered agent. Lam familiar with, and accept the obligations of, Section 607 0505, Florida Statutes, statement for the purpose of changing its registered agent. Lam familiar with, and accept the obligations of, Section 607 0505, Florida Statutes, statement for the purpose of changing its registered agent. Lam familiar with, and accept the obligations of, Section 607 0505, Florida Statutes, statement for the purpose of change lam data for the provide of directors. I hereby accept the obligation for the purpose of the obligation of the obligati	IT. Pursuant to the provisions of Sections 607 2022 and 607 1508. Piorida Statutes, the above-named composition submits inits statement for the purpose of changing its registered agent. Lam familiar with, and accept the obligations of, Section 607 0505, Florida Statutes, Signature registered agent, Lam familiar with, and accept the obligations of, Section 607 0505, Florida Statutes, Signature registered agent with and accept the obligations of, Section 607 0505, Florida Statutes, Signature registered agent with a applicable interview and sequence agent with a applicable interview and sequence agent with a applicable. In the sequence interview and sequence agent with a applicable interview and sequence agent with a applicable. In the term of the appointment are registered interview. Interview and the applicable agent with a applicable interview and agent sequence and interview. Interview and accept the obligations of, Section 607 0505, Florida Statutes. Interview and accept the obligations of a section of the obligation of the obligation and accept the obligation of the obligation and accept the obligations of, Section 607 0505, Florida Statutes. Interview and accept the obligations of a section of the obligation and accept the obligation of the obligation of the obligation obligation and accept the obligation obligation obligation obligation obligation obligation and accept the obligation obligation and accept the obligation obligation obligation obligation and accept the obligation obligation obligation obligation and accept the obligation oblig	Miani FL 33131		84 City	F	85 Zip Code
Inte Luhm, Fred E. WAVE Luhm, Fred E. STRET ADDRESS PO Box 145396 (N/A) STRET ADDRESS PO Box 145396 (N/A) STRET ADDRESS BOOS A. MOPAC EXPression, Suite Aloi 13 STRET ADDRESS BOOS A. MOPAC EXPression, Suite Aloi 14 STRET ADDRESS BOOS A. MOPAC EXPRESSION, SUITE ADDRESS 14 STRET ADDRESS BOOS A. MOPAC EXPRESSION, SUITE ADDRESS 14 STRET ADDRESS BOOS A. MOPAC EXPRESSION, SUITE ADDRESS 14 STRET ADDRESS BOOS A. MOPAC EXPRESSION, SUITE ADDRESS 17 ST.2P CONAL GADDRESS FL 33114 F. ADDRESS FL 33114 F. ADDRESS 17 ST.2P CONAL GADDRESS FL 32 F. ADDRESS FL 32 F. ADDRESS F. F. ADD	ITTLE       DP       DELETE       11 TTTLE       V       Change       Maximum Addition         WAVE       Lunham, Fred E.       (N/A)       13 STREET ADDRESS       PO Box       1453946       (N/A)         STREET ADDRESS       PO Box       1453946       (N/A)       13 STREET ADDRESS       BOD N.       HiKE       Newelij         MAKE       DC       33 DIV       13 STREET ADDRESS       BOD N.       HoPAC       ExpressionAv , Suite ALOI         MAKE       DC       DELETE       21 TTTLE       V       HiKE       Newelij       Delete         STREET ADDRESS       DO LUTY, St.2P       Austria, Tx       787.50       Delete       Addition         STREET ADDRESS       20 STREET ADDRESS       23 STREET ADDRESS       -111/19/798-DI101-D18       Addition         STREET ADDRESS       33 STREET ADDRESS       -111/19/798-DI101-D18       -111/19/798-DI101-D18       Addition         STREET ADDRESS       -111/19/798-DI101-D18       -111/19/798-DI101-D18       -111/19/798-DI101-D18       Addition         STREET ADDRESS       -111/19/798-DI101-D18       -111/19/798-DI101-D18       -111/19/798-DI101-D18       -111/19/798-DI101-D18         STREET ADDRESS       -111/19/798-DI101-D18       -111/19/798-DI101-D18       -111/19/798-DI101-D18       -111	SIGNATURE		ithorized by the corport rida Statutes,	pration's board of directors. Thereby accept the app	pointment as registered
AME     Luhm, Fred E.     (N/A)     12 NAME     13 STREET ADDRESS     MiKe     Newell       BARET ADDRESS     Corcal Sables     FL     33 III     14 CIT-ST.2P     Austrin     Tx     78 T 28 7 9       Intre     DC     DELETE     21 NAME     12 NAME     12 NAME     12 NAME     12 NAME       AME     Luhm, Clarice A.     DELETE     21 NAME     23 SIRET ADDRESS     Austrin     Tx     78 T 28 7 9       Inte     Dot     DELETE     21 NAME     23 SIRET ADDRESS     23 SIRET ADDRESS     14 CIT-ST.2P     Austrin     Tx     7000026921778       Inter ADDRESS     PO Box     I+F 396     (M/A)     23 SIRET ADDRESS     -11/19/9801101018       Inter ADDRESS     Inter ADDRESS     Inter ADDRESS     -11/19/9801101018       Inter ADDRESS	AME     Luhm, Freb E.     12MME     12MME     13MEE     Mike     Notest     12MME     13MEE     12MME     13MEE     12MME     13MEE     12MME     13MEE     12MME     13MEE     12MME     13MEE     13MEE <td></td> <td></td> <td></td> <td></td> <td></td>					
STREET ADDRESS       PO Box 145396       CN/A)         STREET ADDRESS       PO Box 145396       CN/A)         DTY-51-2P       Coral Sables FL       33114         DELETE       21 MLE         DC       DELETE       21 MAR         STREET ADDRESS       PO Box 145396       C/N/A)         PO Box 145396       C/N/A)       21 MAR         STREET ADDRESS       PO Box 145396       C/N/A)         PO Box 145396       C/N/A)       23 STREET ADDRESS         STREET ADDRESS       21 MTLE       23 STREET ADDRESS         STREET ADDRESS       33 STREET ADDRESS       -11/19/98D1101018         STREET ADDRESS       34 OUTY-ST-2P       ************************************	STREET ADDRESS       Po Box 145396       CN/A)       13 STREET ADDRESS       8303 Nr. HoPAC ExPressionAy, Suite Alor         DITY-ST-2P       Coracl Stables       FL       33114       14 GTY-ST-2P       Austrin, Tx       787.59         NAME       Luhm, Clavice A.       DELETE       21 TITLE       2 NAME       23 STREET ADDRESS       23 STREET ADDRESS         DTY-ST-2P       Coracl Stables       FL       33 STREET ADDRESS       2 NAME       2 STREET ADDRESS         DTY-ST-2P       Coracl Stables       FL       33 STREET ADDRESS       -11/19/38D1101018         STREET ADDRESS       33 STREET ADDRESS       -11/19/38D1101018       -11/19/38D1101018         STREET ADDRESS       -11/19/38125       +1000000000000000000000000000000000000	12. OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	
Intre       DC       DELETE       21 mile       Change       Addition         WAVE       Luhm, Clavice A.       22 MAVE       23 SIFEET ADDRESS       23 SIFEET ADDRESS         22PT-ST-2P       Corxal Gables       FL       33 III +       24 DIP-ST-2P       Corxal Gables       Addition         MAVE       33 SIFEET ADDRESS       21 mile       Change       Addition         MAVE       33 SIFEET ADDRESS	Intre       DC       DELETE       21 TITLE       Change       Addition         Intre       DBOOK       14539(6       (NA)       23 STREET ADDRESS       23 STREET ADDRESS         Intre       DELETE       33 TITLE       2 A OTIV: ST-ZP       Cornal Gables       Change       Addition         STREET ADDRESS       DELETE       33 TITLE       Change       Addition         STREET ADDRESS       33 STREET ADDRESS       -11/19/3801101-018       -11/19/3801101-018         STREET ADDRESS       34 OTTY-ST-2P       ######61.25       ######61.25       ######f1.25         STREET ADDRESS       -11/19/3801101-018       -11/01-018       -11/01-018       -11/01-018         STREET ADDRESS       -11/01-018       -11/01-018       -11/01-018       -11/01-018       -11/01-018       -11/01-018       -11/01-018       -11/01-018       -11/01-018       -11/01-018       -11/01-018       -11/01-018       -11/01-018       -11/01-018       -11/01-018       -11/	12. OFFICERS AND		13. 1 1 TITLE	ADDITIONS/CHANGES TO OFFICERS AN	Change M Addition
AAAE     Luhm, Clavice A.     22 NAAE       BIRET ADDRESS     29 SIRET ADDRESS       DT. ST-ZP     DELETE       DELETE     DELETE       SIRET ADDRESS     -11/19/38DI101DI8       AMME     3 SIRET ADDRESS       Corn     3 SIRET ADDRESS       DT. ST-ZP     0 Change       Addition     3 SIRET ADDRESS       SIRET ADDRESS     -11/19/38DI101DI8       SIRET ADDRESS     -11/19/38DI101DI	AAAE       Luhm, Clavice A.       22 NAME         BIREET ADDRESS       23 SIREET ADDRESS         2217-51-2P       Corman - Gablies       FL_33114         DELETE       31 TITLE         MAKE       32 NAME         STREET ADDRESS       31 TITLE         DELETE       31 TITLE         MAKE       32 NAME         STREET ADDRESS       -11/19/98D1101D18         34 OTTY-ST-2P       -11/19/98D1101D18         34 OTTY-ST-2P       -11/19/98D1101D18         34 OTTY-ST-2P       -11/19/98D1101D18         STREET ADDRESS       -11/19/1	12. OFFICERS AND INTE DP Lubm, Fred E.		13. 1 1 TITLE 1 2 NAME	ADDITIONS/CHANGES TO OFFICERS AN WIKE NEWEIL	Change M Addition
STREET ADDRESS       PO Box 145396 (WA)       23 STREET ADDRESS         217'-ST-2P       Corn 9 (145396 (WA)       23 STREET ADDRESS         218'-ST-2P       Corn 9 (145396 (WA)       23 STREET ADDRESS         311'-ST-2P       DELETE       31 TITLE         32 NAME       33 STREET ADDRESS       -11/19/3801101018         STREET ADDRESS       34 CITY-ST-2P       ******61.25         DTUE       34 CITY-ST-2P       *******61.25         OTLE       1 DELETE       41 TITLE         Change       Addition         VAME       4 CITY-ST-2P         OTLE       1 DELETE         4 STREET ADDRESS       -11/19/3801101018         STREET ADDRESS       -11/11/19/19/19/19/19/19/19/19/19/19/19/1	STREET ADDRESS       PO Box 145396 (MA)       23 STREET ADDRESS         217: 57:2P       Corning Gablies       FL       33 L14       2 A CITV. 57:2P         STREET ADDRESS       33 STREET ADDRESS       -11/19/3801101-018         STREET ADDRESS       -11/19/3801101-018         CITV. 57:2P       34 CITV. 57:2P       +******51.25         STREET ADDRESS       -11/19/3801101-018         CITV. 57:2P       34 CITV. 57:2P       +************************************	12. OFFICERS AND INTLE DP Lubm, Fred E. STREET ADDRESS PO Box 145396	DIRECTORS DELETE (N/A) 33114	13. 1 1 TITLE 1 2 NAME 1 3 STREET ADDRESS	ADDITIONS/CHANGES TO OFFICERS AN WIKE NEWELL 8303 N. HOPAC EXPresso	Change M Addition
Internation       2 Annowski 200         Internation       DELETE         Strate       3 STREET ADDRESS         Strate       4 CITY-ST-2IP         Wat       Change         Addition         Addition         Addition         Addition         Addition         Strate         Strate     <	any Strate       2 A (DV Strate         ITLE       DELETE         ave       3 STRET ADDRESS         ave       3 STRET ADDRESS         attribution       4 STRET ADDRESS         attribution       5 STRET ADDRESS	12. OFFICERS AND ITLE DP Lubm, Fred E. STREET ADDRESS PO Box 145396 CITY-ST-ZIP Coral Sables FL STLE DC	DIRECTORS DELETE (N/A) 33114 DELETE	13.           1 1 TITLE           1 2 NAME           1 3 STREET ADDRESS           1 4 CITY - ST - ZIP           2 1 TITLE	ADDITIONS/CHANGES TO OFFICERS AN WIKE NEWELL 8303 N. HOPAC EXPresso	Drange Dr Addition
AAVE       3 2 NAME       7000026921778         STREET ADDRESS       3 3 STREET ADDRESS       -11/19/3801101018         STY-ST-2IP       3 4 0TY-ST-2IP       *******51.25         TITE       0 DELETE       4 1 TITLE         VAME       4 2 NAME       0 Change         VAME       4 2 NAME         VAME       5 2 NAME         VAME       5 2 NAME         VAME       5 3 STREET ADDRESS         VAME       6 3 STREET ADDRE	AVE       3 2 NAME -       7000026921778         STREET ADDRESS       -11/19/3801101018         STY-ST-ZP       34 CITY-ST-ZIP       ######61.25         TITLE       DELETE       41 TITLE         MAKE       4 CITY-ST-ZIP       ######61.25         STREET ADDRESS       -11/19/3801101018         MAKE       4 CITY-ST-ZIP       ######61.25         STREET ADDRESS       4.3 STREET ADDRESS         JTY-ST-ZIP	12. OFFICERS AND ITLE DP Lubm, Fred E. STREET ADDRESS PO Box 145396 DTY-ST-ZIP Coral Sables FL ITLE DC Lubm, Clarice A. STREET ADDRESS PO Box 145396	DIRECTORS DELETE (N/A) 33114 DELETE (N/A)	13.           1 1 TITLE           1 2 NAME           1 3 STREET ADDRESS           1 4 CITY - ST - ZIP           2 1 TITLE           2 2 NAME           2 3 STREET ADDRESS	ADDITIONS/CHANGES TO OFFICERS AN WIKE NEWELL 8303 N. HOPAC EXPresso	Drange Dr Addition
CITY-ST-ZIP       34 CITY-ST-ZIP       ######61_25       ######61_25         OTTLE       DELETE       41 TITLE       Change       Addition         NAME       42 NAME       43 STREET ADDRESS       Addition       Addition         STREET ADDRESS       44 CITY-ST-ZIP       44 CITY-ST-ZIP       Change       Addition         VAME       52 NAME       51 TitLE       Change       Addition         STREET ADDRESS       53 STREET ADDRESS       Change       Addition         VAME       52 NAME       53 STREET ADDRESS       Change       Addition         STREET ADDRESS       53 STREET ADDRESS       54 CITY-ST-ZIP       Change       Addition         STREET ADDRESS       64 CITY-ST-ZIP       Change       Addition         STREET ADDRESS       63 STREET ADDRESS       Change       Addition         STREET ADDRESS       63 STREET ADDRESS       Change       Addition         VAME       63 STREET ADDRESS       64 CITY-ST-ZIP       Change       Addition         VAME       63 STREET ADDRESS       64 CITY-ST-ZIP       Change       Addition         VAME       63 STREET ADDRESS       64 CITY-ST-ZIP       Change       Addition         VI-ST-ZIP       64 STREET ADDRESS       64 CITY-ST-ZI	DITY-ST-ZIP       34 CITY-ST-ZIP       ######61.25       ######61.25       ######61.25         DTLE       DELETE       41 TITLE       Change       Addition         VAME       4.2 NAME       4.3 STREET ADDRESS	12. OFFICERS AND HITE DP Lubm, Fred E. STREET ADDRESS PO Box 145396 CITY-ST-ZIP Coral Sables FL MAME Lubm, Clarice A. STREET ADDRESS PO Box 145396 217-ST-ZIP Coral Sables FL	DIRECTORS DELETE (N/A) 33114 DELETE (N/A) 33114	13.           1 1 TITLE           1 2 NAME           1 3 STPEE I ADDRESS           1 4 CITY-ST-ZIP           2 1 TITLE           2 2 NAME           2 3 STREET ADDRESS           2 4 CITY-ST-ZIP	ADDITIONS/CHANGES TO OFFICERS AN WIKE NEWELL 8303 N. HOPAC EXPresso	Change Addition
ITLE       DELETE       4 1 TITLE       Change       Addition         VAME       4 2 NAME       4 2 NAME       4 2 NAME         STREET ADDRESS       4.3 STREET ADDRESS       4.4 CITY-ST-2IP         ITLE       DELETE       5 1 TITLE       Change       Addition         VAME       5 2 NAME       5 2 NAME       Change       Addition         VAME       5 2 NAME       5 3 STREET ADDRESS       5 3 STREET ADDRESS       Change       Addition         VAME       5 2 NAME       5 3 STREET ADDRESS       5 4 CITY-ST-2IP       Change       Addition         VITY-ST-ZIP       DELETE       6 1 TITLE       Change       Addition         VAME       6 2 NAME       6 3 STREET ADDRESS       Change       Addition         STREET ADDRESS       6 4 CITY-ST-ZIP       Change       Addition         VITY-ST-ZIP       DELETE       6 1 TITLE       Change       Addition         STREET ADDRESS       6 3 STREET ADDRESS       6 3 STREET ADDRESS       Change       Addition         VITY-ST-ZIP       6 3 STREET ADDRESS       6 4 CITY-ST-ZIP       Change       Addition         VITY-ST-ZIP       6 3 STREET ADDRESS       6 4 CITY-ST-ZIP       Change       Addition         VITY-ST-ZIP	ITLE       DELETE       4 1 TITLE       Change       Addition         VAME       4 2 NAME       4.3 STREET ADDRESS       4.4 CITY-ST-ZIP       ITLE       Change       Addition         VAME       4.4 CITY-ST-ZIP       4.4 CITY-ST-ZIP       Change       Addition         VAME       5 2 NAME       5 3 STREET ADDRESS       Change       Addition         VAME       5 2 NAME       5 3 STREET ADDRESS       S 3 STREET ADDRESS       S 3 STREET ADDRESS         VITY-ST-ZIP       5 4 CITY-ST-ZIP       5 4 CITY-ST-ZIP       Change       Addition         VAME       5 3 STREET ADDRESS       5 3 STREET ADDRESS       S 4 CITY-ST-ZIP       Change       Addition         VAME       6 4 CITY-ST-ZIP       6 4 CITY-ST-ZIP       Change       Addition         VAME       8 2 NAME       8 3 STREET ADDRESS       S 3 STREET ADDRESS       Change       Addition         STREET ADDRESS       6 4 CITY-ST-ZIP       6 4 CITY-ST-ZIP       Change       Addition       Addition         VAME       8 2 NAME       8 3 STREET ADDRESS       6 4 CITY-ST-ZIP       Change       Addition         14.       1 Decepty certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(1). Florida Statutes. I further certify that the information indicade	12. OFFICERS AND ITTLE DP Lubm, Fred E. STREET ADDRESS PO Box 145396 DITY-ST-ZIP Coral Sables FL AMME Lubm, Clarice A. STREET ADDRESS PO Box 145396 DTY-ST-ZIP Coral Sables FL ITLE ITLE ITLE	DIRECTORS DELETE (N/A) 33114 DELETE (N/A) 33114	13.           1 1 TITLE           1 2 NAME           1 3 STPEET ADDRESS           1 4 CITY-ST-ZIP           2 1 TITLE           2 NAME           2 3 STREET ADDRESS           2 4 CITY-ST-ZIP           3 1 TITLE           2 3 STREET ADDRESS           2 4 CITY-ST-ZIP           3 1 TITLE           3 2 NAME	ADDITIONS/CHANGES TO OFFICERS AN V Hike Newell 8303 N. HOPAC Expressor Austin, Tx 78759	Change Addition
STREET ADDRESS       4.3 STREET ADDRESS         UTY-SI-ZIP       4.4 CITY-SI-ZIP         ITLE       DELETE         STREET ADDRESS       5.2 NAME         STREET ADDRESS       5.3 STREET ADDRESS         CITY-SI-ZIP       5.4 CITY-SI-ZIP         ITLE       DELETE         STREET ADDRESS       5.3 STREET ADDRESS         CITY-SI-ZIP       5.4 CITY-SI-ZIP         DITLE       0 DELETE         6.1 TITLE       Change         Addition       4.4 CITY-SI-ZIP         STREET ADDRESS       5.4 CITY-SI-ZIP         Change       Addition         STREET ADDRESS       6.4 CITY-SI-ZIP         Change       Addition         STREET ADDRESS       6.3 STREET ADDRESS         CITY-SI-ZIP       6.3 STREET ADDRESS         CITY-SI-ZIP       Change         Addition       6.2 NAME         6.3 STREET ADDRESS       6.4 CITY-SI-ZIP         CITY-SI-ZIP       6.4 CITY-SI-ZIP	STREET ADDRESS       4.3 STREET ADDRESS         JTY - S1 - ZIP       4.4 CITY - S1 - ZIP         ITLE       DELETE         STREET ADDRESS       5.3 STREET ADDRESS         STREET ADDRESS       5.4 CITY - S1 - ZIP         ITLE       DELETE         STREET ADDRESS       5.4 CITY - S1 - ZIP         ITLE       DELETE         STREET ADDRESS       5.4 CITY - S1 - ZIP         ITLE       DELETE         STREET ADDRESS       6.4 CITY - S1 - ZIP         GREET ADDRESS       6.4 CITY - S1 - ZIP         Change       Addition         STREET ADDRESS       6.4 CITY - S1 - ZIP         GREET ADDRESS       6.4 CITY -	12. OFFICERS AND ITTLE DP Lubm, Fred E. STREET ADDRESS PO Box 145396 DTY-ST-ZIP Coral Sables FL AMME Lubm, Clarice A. STREET ADDRESS PO Box 145396 DTY-ST-ZIP Coral Sables FL ITLE	DIRECTORS DELETE (N/A) 33114 DELETE (N/A) 33114	13.           1 1 TITLE           1 2 NAME           1 3 STPEET ADDRESS           1 4 CITY-ST-ZIP           2 1 TITLE           2 NAME           2 3 STREET ADDRESS           2 4 CITY-ST-ZIP           3 1 TITLE           2 NAME           3 3 STREET ADDRESS           3 3 STREET ADDRESS	ADDITIONS/CHANGES TO OFFICERS AN V Hike Newell 8303 N. HOPAC EXPresson Austin, TX 78759 70000269: -11/19/98-	Change Addition
UTY - S1 - 2IP       4.4 CITY - S1 - 2IP         ITLE       1         USY - S1 - 2IP       5         STREET ADDRESS       5.3 STREET ADDRESS         CITY - S1 - 2IP       5.4 CITY - S1 - 2IP         ITLE       1         DELETE       5.4 CITY - S1 - 2IP         ITLE       6.1 TITLE         Change       Addition         STREET ADDRESS       5.4 CITY - S1 - 2IP         ITLE       6.1 TITLE         GREET ADDRESS       6.3 STREET ADDRESS         Change       Addition         STREET ADDRESS       6.3 STREET ADDRESS         CITY - S1 - 2IP       ITLE         OTY - S1 - 2IP       6.3 STREET ADDRESS         CITY - S1 - 2IP       6.4 CITY - S1 - 2IP         CITY - S1 - 2IP       6.4 CITY - S1 - 2IP         CITY - S1 - 2IP       6.4 CITY - S1 - 2IP         CITY - S1 - 2IP       6.4 CITY - S1 - 2IP         CITY - S1 - 2IP       6.4 CITY - S1 - 2IP         CITY - S1 - 2IP       6.4 CITY - S1 - 2IP         CITY - S1 - 2IP       6.4 CITY - S1 - 2IP         CITY - S1 - 2IP       6.4 CITY - S1 - 2IP         CITY - S1 - 2IP       6.4 CITY - S1 - 2IP         CITY - S1 - 2IP       6.4 CITY - S1 - 2IP <td< td=""><td>ITY - S1-ZIP       4.4 CITY - S1-ZIP         ITTE       DELETE         ITTE       DELETE         STREET ADDRESS       5.3 STREET ADDRESS         STREET ADDRESS       5.4 CITY - S1-ZIP         ITTE       DELETE         STREET ADDRESS       6.4 CITY - S1-ZIP         Change       Addition         STREET ADDRESS       6.4 CITY - S1-ZIP         Change       6.4 CITY - S1-ZIP         ITTE ADDRESS       6.4 CITY - S1-ZIP         Change       6.4 CITY - S1-ZIP         ITA       Inservery certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1). 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 it made under 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 it made under certify tha</td><td>12. OFFICERS AND ITLE DP Lubm, Fred E. STREET ADDRESS PO Box 145396 DITY-ST-ZIP Coral Sables FL MAME Lubm, Clarice A. STREET ADDRESS PO Box 145396 DTY-ST-ZIP Coral Sables FL ITLE MAME STREET ADDRESS DTY-ST-ZIP</td><td>DIRECTORS DELETE (N/A) 33114 DELETE (N/A) 33114 DELETE DELETE</td><td>13.           1 1 TITLE           1 2 NAME           1 3 STREET ADDRESS           1 4 CITY-ST-ZIP           2 1 TITLE           2 NAME           2 3 STREET ADDRESS           2 4 CITY-ST-ZIP           3 1 TITLE           2 NAME           3 3 STREET ADDRESS           3 4 CITY-ST-ZIP           3 1 TITLE           3 3 STREET ADDRESS           3 4 CITY-ST-ZIP</td><td>ADDITIONS/CHANGES TO OFFICERS AN V Hike Newell 8303 N. HOPAC EXPresson Austin, TX 78759 70000269: -11/19/98-</td><td>Change Addition</td></td<>	ITY - S1-ZIP       4.4 CITY - S1-ZIP         ITTE       DELETE         ITTE       DELETE         STREET ADDRESS       5.3 STREET ADDRESS         STREET ADDRESS       5.4 CITY - S1-ZIP         ITTE       DELETE         STREET ADDRESS       6.4 CITY - S1-ZIP         Change       Addition         STREET ADDRESS       6.4 CITY - S1-ZIP         Change       6.4 CITY - S1-ZIP         ITTE ADDRESS       6.4 CITY - S1-ZIP         Change       6.4 CITY - S1-ZIP         ITA       Inservery certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1). 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 it made under 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 it made under certify tha	12. OFFICERS AND ITLE DP Lubm, Fred E. STREET ADDRESS PO Box 145396 DITY-ST-ZIP Coral Sables FL MAME Lubm, Clarice A. STREET ADDRESS PO Box 145396 DTY-ST-ZIP Coral Sables FL ITLE MAME STREET ADDRESS DTY-ST-ZIP	DIRECTORS DELETE (N/A) 33114 DELETE (N/A) 33114 DELETE DELETE	13.           1 1 TITLE           1 2 NAME           1 3 STREET ADDRESS           1 4 CITY-ST-ZIP           2 1 TITLE           2 NAME           2 3 STREET ADDRESS           2 4 CITY-ST-ZIP           3 1 TITLE           2 NAME           3 3 STREET ADDRESS           3 4 CITY-ST-ZIP           3 1 TITLE           3 3 STREET ADDRESS           3 4 CITY-ST-ZIP	ADDITIONS/CHANGES TO OFFICERS AN V Hike Newell 8303 N. HOPAC EXPresson Austin, TX 78759 70000269: -11/19/98-	Change Addition
ITLE DELETE 5 1 TILE Change Addition IAME 5 2 NAME 5 3 STREET ADDRESS ITY-ST-ZIP 5 4 CITY-ST-ZIP 5 4 CITY-ST-ZIP 6 1 TILE 6 1 TILE 6 3 STREET ADDRESS STREET ADDRESS 5 4 CITY-ST-ZIP 6 3 STREET ADDRESS 6 4 CITY-ST-ZIP 7 ST-ZIP 7 ST-ZI	ITLE DELETE 51 TIFLE Change Addition Addition STREET ADDRESS STY-ST-ZIP TIFLE S1 STREET ADDRESS S4 CITY-ST-ZIP TIFLE S1 STREET ADDRESS S4 CITY-ST-ZIP TIFLE S1 STREET ADDRESS S4 CITY-ST-ZIP TIFLE S1 STREET ADDRESS S1 STREET ADDRESS	12. OFFICERS AND ITLE DP Lubm, Fred E. STREET ADDRESS PO Box 145396 DTY-ST-ZIP Coral Sables FL ITLE DC Lubm, Clarice A. STREET ADDRESS PO Box 145396 DC Lubm, Clarice A. STREET ADDRESS PO Box 145396 DTY-ST-ZIP Coral Sables FL ITLE	DIRECTORS DELETE (N/A) 33114 DELETE (N/A) 33114 DELETE DELETE	13.           1 1 TITLE           1 2 NAME           1 3 STPEE1 ADDRESS           1 4 CITY-ST-ZIP           2 1 TITLE           2 NAME           2 3 STREET ADDRESS           2 4 CITY-ST-ZIP           3 1 TITLE           2 NAME           3 3 STREET ADDRESS           3 4 CITY-ST-ZIP           3 1 TITLE           3 3 STREET ADDRESS           3 4 CITY-ST-ZIP           4 1 TITLE	ADDITIONS/CHANGES TO OFFICERS AN V Hike Newell 8303 N. HOPAC EXPresson Austin, TX 78759 70000269: -11/19/98-	Change Addition
Integration     5 2 NAME       Street ADDRESS     5 3 STREET ADDRESS       Street ADDRESS     5 4 C(1) - S1 - 2)P       Inte     DELETE       6 1 TITLE     6 1 TITLE       Integration     6 3 STREET ADDRESS       Integration     6 4 C(1) - S1 - 2)P	AME       5 2 NAME         STREET ADDRESS       5 3 STREET ADDRESS         ITY-ST-2P       5 4 CITY-ST-2IP         INLE       DELETE         IAME       6 1 TITLE         IAME       8 2 NAME         IREET ADDRESS       6 4 CITY-ST-2IP         ITY-ST-2IP       10 Florida Statutes. I further certify that the information undicaded on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as it made under cath; that I am an	12. OFFICERS AND ITLE DP Lubm, Fred E. ITREET ADDRESS PO Box 145396 ITY-ST-ZIP Coral Sables FL UTLE DC Lubm, Clarice A. ITREET ADDRESS PO Box 145396 ITY-ST-ZIP Coral Sables FL ITLE I	DIRECTORS DELETE (N/A) 33114 DELETE (N/A) 33114 DELETE DELETE	13.           1 1 TITLE           1 2 NAME           1 3 STREET ADDRESS           1 4 CITY-ST-ZIP           2 1 TITLE           2 NAME           2 3 STREET ADDRESS           2 4 CITY-ST-ZIP           3 1 TITLE           3 2 NAME           3 3 STREET ADDRESS           3 4 CITY-ST-ZIP           3 1 TITLE           3 3 STREET ADDRESS           3 4 CITY-ST-ZIP           4 1 TITLE           4 2 NAME           4 2 NAME	ADDITIONS/CHANGES TO OFFICERS AN V Hike Newell 8303 N. HOPAC EXPresson Austin, TX 78759 70000269: -11/19/98-	Change Addition
TREET ADDRESS       5.3 STREET ADDRESS         ITY-ST-ZIP       5.4 CITY-ST-ZIP         DELETE       5.4 CITY-ST-ZIP         IREET ADDRESS       5.4 CITY-ST-ZIP         IREET ADDRESS       6.3 STREET ADDRESS         IREET ADDRESS       6.3 STREET ADDRESS         INY-ST-ZIP       6.3 STREET ADDRESS         ITY-ST-ZIP       6.4 CITY-ST-ZIP         ITY-ST-ZIP       6.4 CITY-ST-ZIP	Interact ADDRESS       5.3 STREET ADDRESS         Inty-ST-2P       5.4 CITY-ST-2P         Interaction       DELETE         6 1 TITLE       6 1 TITLE         INE       0 2 NAME         IREET ADDRESS       6 3 STREET ADDRESS         ITY-ST-2IP       6 1 TITLE         ITY-ST-2IP       6 3 STREET ADDRESS         ITY-ST-2IP       6 4 CITY-ST-2IP         ITY-ST-2IP       1 Dereby cartify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1). Florida Statutes. I further cartify that the information undicaded 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	2. OFFICERS AND ITLE DP Lubm, Fred E. TREET ADDRESS PO Box 145396 ITV-ST-ZIP Coral Sables FL UTLE DC Lubm, Clarice A. TREET ADDRESS PO Box 145396 ITV-ST-ZIP Coral Sables FL ITLE AME TREET ADDRESS ITY-ST-ZIP ITLE IT	DIRECTORS DELETE (N/A) 33114 DELETE (N/A) 33114 DELETE DELETE	13.           1 1 TITLE           1 2 NAME           1 3 STREET ADDRESS           1 4 CITY-ST-ZIP           2 1 TITLE           2 NAME           2 3 STREET ADDRESS           2 4 CITY-ST-ZIP           3 1 TITLE           3 2 NAME           3 3 STREET ADDRESS           3 4 CITY-ST-ZIP           4 1 TITLE           4 2 NAME           4.3 STREET ADDRESS           4.4 CITY-ST-ZIP	ADDITIONS/CHANGES TO OFFICERS AN V Hike Newell 8303 N. HOPAC EXPresson Austin, TX 78759 70000269: -11/19/98-	Change Addition
ITY-ST-ZIP       5.4 CITY-ST-ZIP         ITE       5.4 CITY-ST-ZIP         ITE       6.1 TITLE         IAME       6.2 NAME         IREET ADDRESS       6.3 STREET ADDRESS         ITY-ST-ZIP       6.4 CITY-ST-ZIP         ITY-ST-ZIP       6.4 CITY-ST-ZIP	Int F. ST-2IP       5.4 CITY-ST-2IP         Int E.       DELETE         IMME       6.1 TITLE         IREET ADDRESS       6.2 NAME         IN-ST-2IP       6.3 STREET ADDRESS         ITY-ST-2IP       6.4 CITY-ST-2IP         (4.1) Thereby cartify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1). Florida Statutes. I further cartify 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	2. OFFICERS AND ITLE DP Lubm, Fred E. ITRET ADDRESS PO Box 145396 ITV-ST-ZIP Coral Sables FL UTLE DC Lubm, Clarice A. ITRET ADDRESS PO Box 145396 ITV-ST-ZIP Coral Sables FL ITLE	DIRECTORS DELETE (N/A) 33114 DELETE (N/A) 33114 DELETE DELETE	13.           1 1 TITLE           1 2 NAME           1 3 STREET ADDRESS           1 4 CITY-ST-ZIP           2 1 TITLE           2 NAME           2 3 STREET ADDRESS           2 4 CITY-ST-ZIP           3 1 TITLE           2 NAME           3 3 STREET ADDRESS           3 4 CITY-ST-ZIP           3 1 TITLE           3 2 NAME           3 3 STREET ADDRESS           3 4 CITY-ST-ZIP           4 1 TITLE           4 2 NAME           4.3 STREET ADDRESS           4.4 CITY-ST-ZIP           5 1 TITLE           5 1 TITLE	ADDITIONS/CHANGES TO OFFICERS AN V Hike Newell 8303 N. HOPAC EXPresson Austin, TX 78759 70000269: -11/19/98-	Change Addition
INLE DELETE 6 1 TITLE 6 1 TITLE 6 1 TITLE 6 2 NAME AME IRRET ADDRESS ITY-SI-2IP 4. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes, 1 further certify that the information	INLE DELETE 0 1 TITLE 0 Addition AME IREET ADDRESS ITY-SI-ZIP 4. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1). 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	2. OFFICERS AND ITLE AME ITLE DP Lubm, Fred E. ITLE DO Box 145396 ITV-ST-ZIP Coral Sables FL ITLE DC AME ITLE DC Lubm, Clarice A. ITRET ADORESS ITV-ST-ZIP ITLE AME ITREET ADORESS ITV-ST-ZIP ITLE AME ITLE AME	DIRECTORS DELETE (N/A) 33114 DELETE (N/A) 33114 DELETE DELETE	13.           1 1 TITLE           1 2 NAME           1 3 STPEET ADDRESS           1 4 CITY-ST-ZIP           2 1 TITLE           2 NAME           2 3 STREET ADDRESS           2 4 CITY-ST-ZIP           3 1 TITLE           2 NAME           3 3 STREET ADDRESS           3 4 CITY-ST-ZIP           3 1 TITLE           3 2 NAME           3 3 STREET ADDRESS           3 4 CITY-ST-ZIP           4 1 TITLE           4 2 NAME           4.3 STREET ADDRESS           4.4 CITY-ST-ZIP           5 1 TITLE           5 2 NAME	ADDITIONS/CHANGES TO OFFICERS AN V Hike Newell 8303 N. HOPAC EXPresson Austin, TX 78759 70000269: -11/19/98-	Change Addition
AME 1REET ADDRESS 17- ST-2IP 4. Thereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes, I further certify that the information	AME IREET ADDRESS ITY-ST-ZIP 4. 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	2. OFFICERS AND ITLE DP Lubm, Fred E. TREET ADDRESS PO Box 145396 ITV-ST-ZIP Coral Sables FL ITLE DC AME Lubm, Clarice A. TREET ADDRESS ITV-ST-ZIP Coral Sables FL ITLE AME TREET ADDRESS ITV-ST-ZIP TLE AME TREET ADDRESS ITV-ST-ZIP TLE	DIRECTORS DELETE (N/A) 33114 DELETE (N/A) 33114 DELETE DELETE	13.         1 1 TITLE         1 2 NAME         1 3 STREET ADDRESS         1 4 CITY-ST-ZIP         2 1 TITLE         2 2 NAME         2 3 STREET ADDRESS         2 4 CITY-ST-ZIP         3 1 TITLE         2 NAME         3 3 STREET ADDRESS         3 4 CITY-ST-ZIP         4 1 TITLE         4 2 NAME         4.3 STREET ADDRESS         4.4 CITY-ST-ZIP         5 1 TITLE         5 2 NAME         5 3 STREET ADDRESS         4.4 CITY-ST-ZIP         5 1 TITLE         5 2 NAME         5 3 STREET ADDRESS	ADDITIONS/CHANGES TO OFFICERS AN V Hike Newell 8303 N. HOPAC EXPresson Austin, TX 78759 70000269: -11/19/98-	Change Addition
street ADDRESS (4 3 STREET ADDRESS (4 4 017 - ST - 2IP (4. ) Thereby 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	INTY-SI-ZIP   If a STREET ADDRESS  If a STREET ADD	12. OFFICERS AND ITLE DP Lubm, Fred E. STREET ADDRESS PO Box 145396 DTY-SI-ZIP Coral Sables FL STREET ADDRESS STREET STREET ADDRESS STREET STREET ADDRESS STREET STREE	DIRECTORS DELETE (N/A) 33114 DELETE (N/A) 33114 DELETE DELETE	13.           1 1 TITLE           1 2 NAME           1 3 STPEET ADDRESS           1 4 CITY - ST - ZIP           2 1 TITLE           2 2 NAME           2 3 STREET ADDRESS           2 4 CITY - ST - ZIP           3 1 TITLE           2 NAME           3 3 STREET ADDRESS           3 4 CITY - ST - ZIP           3 1 TITLE           2 NAME           3 3 STREET ADDRESS           3 4 CITY - ST - ZIP           4 1 TITLE           4 2 NAME           4.3 STREET ADDRESS           4.4 CITY - ST - ZIP           5 1 TIFLE           5 2 NAME           5 3 STREET ADDRESS           5 4 CITY - ST - ZIP           5 1 TIFLE           5 2 NAME           5 3 STREET ADDRESS           5 4 CITY - ST - ZIP           5 1 TIFLE           5 3 STREET ADDRESS           5 4 CITY - ST - ZIP	ADDITIONS/CHANGES TO OFFICERS AN V Hike Newell 8303 N. HOPAC EXPresson Austin, TX 78759 70000269: -11/19/98-	Change Addition
6 4 GITY-ST-ZIP 6.4 GITY-ST-ZIP 14. Thereby 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	6 4 CITY-ST-ZIP 6 4 CITY-ST-ZIP 14. Thereby cartify 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	12. OFFICERS AND ITLE DP Lubm, Fred E. STREET ADDRESS PO Box 145396 DTV-ST-ZIP Coral Sables FL UTLE DC Lubm, Clarice A. BOBOX 145396 Lubm, Clarice A. PO Box 145396 Lubm, Clarice A. PO Box 145396 LUBME STREET ADDRESS DTV-ST-ZIP ITLE UAME STREET ADDRESS DTV-ST-ZIP ITLE UAME STREET ADDRESS DTV-ST-ZIP ITLE UAME STREET ADDRESS DTV-ST-ZIP ITLE UAME STREET ADDRESS DTV-ST-ZIP ITLE	DIRECTORS DELETE (N/A) 33114 DELETE (N/A) 33114 DELETE DELETE	13.           1 1 TITLE           1 2 NAME           1 3 STPEET ADDRESS           1 4 CITY-ST-ZIP           2 1 TITLE           2 2 NAME           2 3 STREET ADDRESS           2 4 CITY-ST-ZIP           3 1 TITLE           2 NAME           3 3 STREET ADDRESS           3 4 CITY-ST-ZIP           3 1 TITLE           3 2 NAME           3 3 STREET ADDRESS           3 4 CITY-ST-ZIP           3 1 TITLE           4 1 TITLE           4 2 NAME           4.3 STREET ADDRESS           4.4 CITY-ST-ZIP           5 1 TITLE           5 2 NAME           5 3 STREET ADDRESS           5 4 CITY-ST-ZIP           5 1 TITLE           5 3 STREET ADDRESS           5 4 CITY-ST-ZIP           6 1 TITLE	ADDITIONS/CHANGES TO OFFICERS AN V Hike Newell 8303 N. HOPAC EXPresson Austin, TX 78759 70000269: -11/19/98-	Change Addition
14. Thereby cartify that the information supplied with this filling 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	12. OFFICERS AND HTLE DP Lubm, Fred E. STREET ADDRESS PO Box 145396 Coral Sables FL UTLE DC Lubm, Clarice A. STREET ADDRESS Coral Sables FL UMME STREET ADDRESS CITY-ST-ZIP UTLE VAME STREET ADDRESS CITY-ST-ZIP UTLE VAME STREET ADDRESS CITY-ST-ZIP UTLE VAME STREET ADDRESS CITY-ST-ZIP UTLE VAME STREET ADDRESS CITY-ST-ZIP UTLE VAME STREET ADDRESS CITY-ST-ZIP UTLE VAME STREET ADDRESS CITY-ST-ZIP UTLE VAME STREET ADDRESS CITY-ST-ZIP UTLE VAME	DIRECTORS DELETE (N/A) 33114 DELETE (N/A) 33114 DELETE DELETE	13.           1 1 TITLE           1 2 NAME           1 3 STPEET ADDRESS           1 4 CITY-ST-ZIP           2 1 TITLE           2 2 NAME           2 3 STREET ADDRESS           2 4 CITY-ST-ZIP           3 1 TITLE           2 NAME           3 3 STREET ADDRESS           3 4 CITY-ST-ZIP           3 1 TITLE           3 2 NAME           3 3 STREET ADDRESS           3 4 CITY-ST-ZIP           4 1 TITLE           2 NAME           4.3 STREET ADDRESS           4.4 CITY-ST-ZIP           5 1 TITLE           5 2 NAME           5 3 STREET ADDRESS           5 4 CITY-ST-ZIP           5 1 TITLE           5 2 NAME           5 3 STREET ADDRESS           5 4 CITY-ST-ZIP           5 1 TITLE           5 2 NAME           5 3 STREET ADDRESS           5 4 CITY-ST-ZIP           6 1 TITLE           6 2 NAME	ADDITIONS/CHANGES TO OFFICERS AN V Hike Newell 8303 N. HOPAC EXPresson Austin, TX 78759 70000269: -11/19/98-	Change Addition
	increases or may a move report or supprisonence a move to the and accorder and that my signature shall have the same the state of the same to the and the same to	12. OFFICERS AND HTLE DP Lubm, Fred E. STREET ADDRESS PO Box 145396 Coral Sables FL UTLE DC Lubm, Clarice A. STREET ADDRESS DO Box 145396 Lubm, Clarice A. PO Box 145396 Lubm, Clarice A. STREET ADDRESS CORAL Sables FL UTLE VAME STREET ADDRESS CITY-ST-ZIP UTLE VAME STREET ADDRESS CITY-ST-ZIP UTLE VAME STREET ADDRESS CITY-ST-ZIP UTLE VAME STREET ADDRESS CITY-ST-ZIP UTLE VAME STREET ADDRESS CITY-ST-ZIP UTLE VAME STREET ADDRESS CITY-ST-ZIP UTLE VAME STREET ADDRESS CITY-ST-ZIP UTLE VAME STREET ADDRESS CITY-ST-ZIP UTLE VAME STREET ADDRESS CITY-ST-ZIP UTLE VAME STREET ADDRESS CITY-ST-ZIP	DIRECTORS DELETE (N/A) 33114 DELETE (N/A) 33114 DELETE DELETE	13.           1 1 TITLE           1 2 NAME           1 3 STPEET ADDRESS           1 4 CITY-ST-ZIP           2 1 TITLE           2 2 NAME           2 3 STREET ADDRESS           2 4 CITY-ST-ZIP           3 1 TITLE           2 NAME           3 3 STREET ADDRESS           3 4 CITY-ST-ZIP           3 1 TITLE           3 2 NAME           3 3 STREET ADDRESS           3 4 CITY-ST-ZIP           4 1 TITLE           2 NAME           4.3 STREET ADDRESS           4.4 CITY-ST-ZIP           5 1 TITLE           5 2 NAME           5 3 STREET ADDRESS           5 4 CITY-ST-ZIP           5 1 TITLE           5 2 NAME           5 3 STREET ADDRESS           5 4 CITY-ST-ZIP           5 1 TITLE           5 2 NAME           6 3 STREET ADDRESS           6 3 STREET ADDRESS	ADDITIONS/CHANGES TO OFFICERS AN V Hike Newell 8303 N. HOPAC EXPresson Austin, TX 78759 70000269: -11/19/98-	Change Addition