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CORPORATION ANNUAL REPORT 1995



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # F24680

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OLVISION OF CORPORATIONS

95 MAY 25 AH 11: 44

R	OBERT DONA	NTO, INC.										
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Principal Place of Business Mailing Address												
2404 N.W. 98TH LANE 2404 N.W. 98TH LANE CORAL SPRINGS FL 33065-4966 CORAL SPRINGS FL 33065					065.4066							
OOM	L OF MARCO I L 500		00	and drimings it w	***************************************			DO NOT WRITE				
								3. Date incorporated or Qualified 04/09/1981		le of Last 5/01/19	•	ort
_	ncipal Place of Bus	siness		Mailing Address				4. FEI Number		<u> </u>		olied For
21	2. 4. 6		26	0.11. 4.1.0				59-2081952		<u> </u>		Applicable
22 22	Suite, Apt. #, etc.			Suite, Apt. #, etc.			5. Certificate of Status Desired				dditional quired	
	y & State	· · · · · · · · · · · · · · · · · ·		City & State			· · · · · · · · · · · · · · · · · · ·	6. Election Campaign Financing		\$5.	00	May Be
23			28					Trust Fund Contribution				Fees
Žφ		Country	<u> </u>	Zp	Cour	шy		6. Inis corporation has liability for			5. It	19.032,
24	0 No.	25	29		30			Florida Statutes Yes 10. Name and Address of New F				
	9. Nan	ne and Address of Cu	rrent Regist	ered Agent		B1	Name	10. Name and Address of New I	iegisteret	Agent		
no.	NATO, ROBERT	т			L							
5230 NW 15TH STREET						82	Street Addres	ss (P.O. Box Number is Not Acceptal	ole)			
	ARGATE FL 330				ļ.	B3						
*					Į.		A :			1221	Zip C	
					'	84	City		FI	85	Zip C	000
or	registered agent.	isions of Sections 607.0 or both, in the State of i cept the obligations of, S	Florida Such	change was authorize	zed by the co	n-B	named corpora oration's board	tion submits this statement for the pu f of directors. I hereby accept the app	rpose of cl ointment a	nanging its is register	s regi:	stered office ent. I am
SIGNA	TURE	ed or printed name of registered	www.and.tms.f.n	retentio (N	OIF Burnstmed A	Lane	f Stylvalure required t	when roset alexts	DATE			
12.	September 1933		AND DIREC		13.		s system requires	ADDITIONS/CHANGES TO OFF		D DIRECT	ORS	iN 12
TITLE	PD			<u>-5. </u>	1 1 111	LE				Char	nge	Addition
NAME		o, robert			1 2 NA	ME						
STREET A		W 15TH STREET			13 STR	EET	ADDRESS					
CITY-ST	. ZIP MARGA	NTE FL			1 4 CIT	Y · S	I ZIP					11.
TITLE					2 1 1171					Char	nge	Addition
NAME					2 2 NA)							
STREET A	l.						ADDRESS					
CITY-ST	ZIP				2 4 CIT		T - ZiP			Char	nne	Addition
NAME					3 2 HA							
	ADDHESS						ADDRESS					
City St	i				34 CIT							
TITLE					4 1 TUT	E				Char	100	Addition
NAME					4 2 10/0	ME.						
STREET #	ADDRESS				4.3 STR	EET	ADDRESS					
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TIFLE					5 1 1/31	l				L Char	nge	Addition
NAME					5 2 NA							
	ADDRESS						ADDRESS					
CITY ST	ZIP				5.4 CIT		I - ZiP			Char	I/I e	Addition
TILLE					61100					6181	·Ju	radinati
NAMI	*DOWES				6.2 RAI		ADDOLES					
	ADDRESS				64 CIT		ADDRESS T. 7th					
14. 1c	lo hordy corble th	at the information suppl	iod with this !	hling is voluntarily fun	nishort nact d	loo!	u not ounlify for	r the exemption stated in Section 119	.07(3)(k), F	lorida Stat	utos.	Llurther
Ct.	ertify that the inform oth; that I am an of	antion indicated on this.	nanua) report orporation or	or supplemental and the receiver or truste	al hoqor laur noworma oc	100	い のいわ かたたいれん	o and that my signature shall have the report as required by Chapter 607, Fi	maina mar	u oneci ar	i it etii	าดก บทดด