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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

	1996									
DOCU 1. Corporation		# F328	92	(4)						
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Principal Place	of Business		Maili	ing Address	· · · · · · · · · · · · · · · · · · ·					
1300 NORTH FEDERAL HWY. STE 107			1300 NORTH FEDERAL HWY, STE 107							
BOCA RATO	N FL 33432			XXA RATON FL 33						
							3. Date incorporated or Quali 04/30/1981	T	e of Last I 3/24/19	
2. Principal Pl	ace of Busin	ess	<u> </u>	Mailing Address			4. FET Number	1	0/24/18	Applied For
Suite, Apt.	# etc		26	Suite, Apt. #, etc.			59-2091871			Not Applicabl
2	, oto.		27	suite, Apr. #, etc.			5. Certificate of Status Desire	g 🗀	-	5 Additional Required
City & State	9		·	Orty & State			6. Election Campaign Financi			00 May Be
3			28		·· 		Trust Fund Contribution			ed to Fees
Zip 1		Country 25	29	'ip	Coun	try	8. This corporation has liabilit		ax under s	199.032,
<u> </u>	9. Name	and Address of Curr		red Agent	30		Florida Statutes 7 10. Name and Address of N	Yes No	Agoni	
						Name	10, 114110 2110 71001033 01 11	ow negistered	Ageil	**
PAPA, JOSEPH F 1300 N FED HWY, STE 107				<u></u>		32 Street Add	ddress (P.O. Box Number is Not Acceptable)			
BOCA R	ATON FL	13432			8	33				
					H.				85 7	p Code
					8	Gity		P 1	1001.	
11. Pursuant t	o the provisi	ons of Sections 607,05	02 and 607.1	508. Florida Statu	too the electric	1	ration submits this statement for the	FL	• -	
					ites, the above	1	ration submits this statement for th rd of directors. Thereby accept the	FL purpose of cha appointment as	• -	registered offic d agent. I am
familiar wit		ons of Sections 607.05 both, in the State of Fig at the obligations of, Se			ites, the above	1	ration submits this statement for the ard of directors. Thereby accept the	FL e purpose of ch appointment as	• -	registered offic d agent. I am
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SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR