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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

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1. Corporation		( )		110111   1111	
Principal Place	of Business	Mailing Address			TIO OFIL DIRIL BIOTI BIONI OLDIA BIONI OFINI 100)
1322 N.W. 100 AVENUE Coral Springs FL 33071		1322 N.W. 100 AVENUE CORAL SPRINGS FL 33071			
				3. Date Incorporated or Qualified 11/25/1981	3a. Date of Last Report 04/13/1995
2. Principal Pla 21	ce of Business	2a. Mailing Address 26		4. FEI Number 59-2147786	Applied For Not Applicable
Suite, Apt. #	t, etc.	Suite, Apt #, etc		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
<b>23</b>   Ζφ	Country	<b>28</b>	Country	Trust Fund Contribution  8. This corporation has liability for	Added to Fees
24	25 9. Name and Address of Current	[29]	30		MNo
	g, Halla alla Addieda di Califoli	t riegistered rigent	81 Name	IV. Name and Address of New F	and a second second
JANKUS STEFAN A. 1322 N.W. 100TH AVENUE			82 Street Add	Street Address (P.O. Box Number is Not Acceptable)	
	. SPRINGS FL 33065		83		
			84 City		FL 85 Zip Code
12. TITLE NAME	OFFICERS AND D JANKUS, JUDITH A		13. 1 ' Il'LE 12 NAME	ADDITIONS/CHANGES TO OFF	CATE ICERS AND DIRECTORS IN 12 Change Addition
STREET ADDRESS CITY-ST-ZIP	1322 NW 100TH AVE. CORAL SPRINGS FL		1.3 SUHEF LADDRESS   1.4 dity Sr ZiP		
TITLE NAME	DPS Jankus, Stefan A	DELETE	2 1 LE 22 ME		☐ Change ☐ Addition
STREET ADDRESS	1322 NW 100TH AVE.		23: HEET ADDRESS		
CITY-ST-ZIP TITLE	CORAL SPRINGS FL	DELETE	2.4 7-S1-ZiP 3.1-1E		Change Addition
NAME STREET ADDRESS CHY+ST-ZIP			3.2 ME 3.3 DEET ADDRESS		
TITLE		☐ DELETE	34 - S1 - ZIP 4 1) E		Change Addition
NAME STREET ADDRESS			4.2) PE 4.3 LF* ADDRESS		
CITY-ST-ZIP TITUE		DELETE	4.5 ST ZIP		Change Addition
NAME STREET ADDRESS			5 ADDRESS		
C:TY-ST-7;P			5 ST ZIP		
TITLE NAME STREET ADDRESS		☐ DELETE	62 63   1 ADDRESS		Change Addition
certify that oath; that I appears in	the information indicated on this arms am an officer or director of the corpor Block 12 or Block 13 yearningst, or a	al report of supplemental an	nual report it true and accura eo empower d to execute th	for the exemption stated in Section 119 are and that my signature shall have the is report as required by Chapter 607, Fi	same legal effect as it made under orida Statutes; and that my name
SIGNAT	URE: SKEATURE AND YPEP OR	PRINTED NAME OF SIGNING OFFIC		4/29/96	154-753-7632