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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B Mortham
Secretary of State

DIVISION OF CORPORATIONS

1996

SIGNATURE:

INACNIT # E7707

1. Corporation	n Name	# F772 LDWIDE RESALE		(O)			1 18 8 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1)		1 1 11 1 18/1 1	EN 8787 8180 1840
Principal Place	of Business		Mail	ing Address			{				
2915 S ST.	rincipal Place of Business 2915 S STATE RD 7 W HLWD FL 33023			2915 S STATE RD 7 W HLWD FL 33023							
····							3. Date Incorporated 04/22/1982		3a. Date	of Last F	
2. Principal Pla 1]	ace of Busines	s	2a. 1	Mailing Address			4, FEI Number 59-81785	10			Applied For Not Applicable
Suite, Apt. a	Suite, Apt. #, etc. City & State			Suite, Apt. #, etc. 27 City & State			5. Certificate of Status Desired			\$8.75	75 Additional
City & State							Election Campaign Financing				\$5.00 May Be
Z _I p	Т	Country	28	Zφ	Count	ln/	Trust Fund Contribu		interviele to	Adde	d to Fees
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	g, Name a	nd Address of Currer	nt Registe	red Agent		11 Name	10. Name and Addres	s of New F	Registered A	gent	
GODIN	N, BARRY S.				8	2 Street Add	Iress (P.O. Box Number is N	lot Acceptal	nle)		· · · · · · · · · · · · · · · · · · ·
	SW 17TH C	OURT			L	13					
DAVIE	FL 33324										
					8	14 City			CI	85 Zi	p Code
11. Pursuant to	to the provision	ns of Sections 607.0502	2 and 607.	1508, Florida Statute	s, the above	e-named corpo	ration submits this statemen	nt for the pu	FL rpose of cha	nging its i	registered office
or registere familiar wit SIGNATURE	ed agent, or both, and accept	oth, in the State of Flori the obligations of, Sect printed name of registered agent	da. Such of tion 607.05 t and title if app	change was authorize 505, Fiorida Statutes.	E: Registered A	3-named corporporation's boa	and of directors. I hereby acc	ept the app	rpose of cha pointment as	registered	Jagent Lam
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NU TYPEO ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR