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

1. Corporation I	MENT # F8364 DLDING CORP.	1 (3)						
Principal Place of Business		Mailing Address						HI (1017 (1011 1001
126 N. OCEAN BLVD DELRAY BEACH FL 33483		126 N. OCEAN BLVD DELRAY BEACH FL 33483						
						3. Date incorporated or Qualified 06/02/1982	3a. Date of Last 04/28/19	•
2. Principal Plac	ce of Business	2a. Mailing Address				4- FEI Number		Applied For
Suite, Apt #, etc		Suite Apt #, etc.				59-2195369	\$8.7	Not Applicable 75 Additional
22	, 610	27				5. Certificate of Status Desired		e Required
City & State		City & State				Election Campaign Financing Trust Fund Contribution		00 May Be
Z ip	Country	28 Z ₁ 0	Cour	itry		This corporation has liability for in	AUG	s 199.032.
4 25		29 30				Florida Statutes 🔲 Yes 🖾 No		
	9. Name and Address of Curre	nt Registered Agent		0.4		10. Name and Address of New R	egistered Agent	
0445E	5111 1110			81	Nanie		A48.19 (419 (777)	
SAUVE, J 500 N. A 1				82	Street Add	ress (P.O. Box Number is Not Acceptabl	e)	
	D BEACH FL 33441		T	83				
000.4			-	84	City		85	Zıp Code
					,	ration submits this statement for the purp	FL	
SIGNATURE S	PS		1 1 1 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	LE	हरूम प्राप्त रहे हो।	ADDITIONS/CHANGES TO OFFI	DATÉ CERS AND DIREC Chang	
NAME STREET ADDRESS	SAUVE, JEAN LUC 500 N. A1A			KEET A	ADURESS			
CITY-ST ZIP	DEERFIELD BEACH FL	T DELETE	1 4 SIT 2 1 TII		ZIF.		Chang	ge Addition
NAME	BELANGER, DIANE		2.2 NAME					
STREET ADDRESS	500 N. A1A		2 3 515	RF81 /	ADDRESS.			
CITY-ST-ZIP	DEERFIELD BEACH FL	Fig bright	2.4 C·1		. 71F		Chang	e 🗍 Addition
TITLE NAME		DELETE	3 1 F 5 3 2 NAI				· [] Chang	e
STREET ADDRESS					ADDRESS			
CHY-ST-ZIP			3.4.00					
TITLE		DELETE	4 1 10	LF			☐ Chang	e 🔲 Addition
NAME			4.2 NA					
STREET ADDRESS					ADDRESS.			
CITY-ST-ZIP		DELETE	4.4 CP 5.1 HJ		1 - 719		Chand	je 🗍 Addition
TITLE NAME		Detters	5 2 NA					Jo
STREET ADORESS					ADDRESS			
CITY-ST-ZIF			5.4 CH					
TITLE				6 † THLE			☐ Chang	ge 🔲 Addition
NAME			6.2 NA	Μŧ				
STREET ADDRESS			6381	REFF	ADDRESS			
CITY-ST-ZIP	and its that the information a real and	with this files are exclusively. Co-	6 4 CII			for the evacuation stated in Section 110.	17/31/kl Florida Sta	itutes I further
certify that oath; that I	the information indicated on this and an an officer or director enthe corp Block 12 or Blo	iual report or supplemental an oration or the receiver or trust	nual report is se empower Iress.	s trui editi	e and accur	for the exemption stated in Section 119, atte and that my signature shall have the his report as required by Chapter 607. Fit	same legal effect a	is if made under that my name

CR2E034 (12/95)