2-11-91 B- 1946 C FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED Feb 17 1997 8:00am Secretary of State

DOCUMENT # F9400006312 (2)

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Principal Place of Business Mailing Address												E NOGRABIA BANK KURIN BIDRI BURAK BURIK BURIK BURIK	1 43 111 43111	 	# 11 11 \$11 1
3700 NW 124 AVE PO BOX 770397 CORAL SPRINGS FL 33065 US PO BOX 770397 CORAL SPRINGS FL 330774)3 97								
										Ţ	3.	Date Incorporated or Qualified 12/12/1994		ate of Last R /20/1996	eport
2. Principa¹ Place of Business					2a, Mailing Address						4.	FEI Number			oplied For
21					26							06-1211302			ot Applicable
Suite, Apt. #, etc. 22					Suite, Apt #, etc.						5.	Certificate of Status Desired		Fee Re	Additional equired
City & State					City & State						6.	Election Campaign Financing			May Be
23 Zip	Zip Country			28	28			untry				Trust Fund Contribution			to Fees
24		Country	29			30				₽.	This corporation has liability for Florida Statutes	intangiole]] Yes = [. 199.032,	
			ddress of Current Registered Agent			I	001	<u> </u>			10.	Name and Address of New Re			
HOV	WE, STEVE							81	Name)					
3700 NW 124TH AVE CORAL SPRINGS FL 33065								82 Street Add			ss (F	P.O. Box Number is Not Accepta	ole)	······································	
COPAL SPRINGS PL 33065								83			·				
								84	City	·	•		FL	85 Zip	Code
11. Pursuant office or r	to the provis	sions gent,	of Sections 607.05 or both, in the Stat	02 and 6 e of Flori	507 1508, Flor ida. Such cha	ida Statute nge was a	s, the a	ibove above	name	d corpo rporatio	ratio n's t	on submits this statement for the board of directors. I hereby acce		of changing it pointment as	ts registered registered
agent. La SIGNATURE			nd accept the oblig	-											
	Styrin rectyles	s or pri	itud name of registered ag			(NOTE			ni signatu	re required		n reinstating)	DATE	D DIDEOTOI	20 (1) 40
12.	d		OFFICERS AT	NO DIFFE		DELETE	13.	ITLE		V		ADDITIONS/CHANGES TO OFFI	SEHS AIVI	Change	Addition
NAME	HUFEST	FTI F	R, BARRY		, h	, LLLIC		NAME		Y				en crisingo	Land Francisco.
	STREET ADDRESS 3700 NW 124TH AVE								ADDRESS						
CITY-ST-ZIP CORAL SPRINGS FL 33085								1.4 CITY-SY-ZIP		1					
TITLE	٧					DELETE		IITLE		P		***************************************		Change	Addition
NAME	HOWE,	STEV	Έ				2.21	NAME		1				•	
STHEET ADDRESS	3700 NV	V 124	ITH AVE				235	STREET	ADDRESS						
CORAL SPRINGS FL 33065								2 4 City-ST-ZIP							
1:1LE						DELETE	311	IITLE						Change	Addition
NAME							321	NAME		l					
STREET ADDRESS	1						3.3 5	STREET	ADDRESS	: [
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THILE						DELETE		TITLE						Change	Addition
NAME								NAME							
STREET ADDRESS									ADDRESS	i					
CITY - ST - 20P						DELETE		CITY-S	1 - ZIP			······································	·····	Change	Addition
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NAME capacit about 60									*DUDE CC	,					
STREET ADORESS								CITY - S	ADDRESS	'					
CITY-ST-ZIF TITLE	ł			·		ELETE		TITLE	11. til.	1				Change	Addition
NAME	1						1	NAME		.					
STREET ADORESS									ADDRESS	,					
CITY-ST-ZIP								CITY-S							
	by certify the	at the	information suppli	ed with I	this filing does	not qualif				stated	in Se	ection 119.07(3)(i). Florida Statut	es. I furthe	er certify that	t the

information indicated on this annual report or supplierential annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statules; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address

SIGNATURE

SIGNATURE AND PRED OF PHINTED NAME OF SIGNING OFFICER OF DIRECTO

7/7/97 954 341 7700