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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

เจ	96	DIVISION OF COF	RPORATIONS				
OCUMI Corporation Na	ENT # <b>F9500</b> 0						
CREATIVI	e food management,	1868   116   1861   1864   1864   1864   1864   1864   1864   1864   1864   1864   1864   1864   1864   1864					
Principal Place of	Business	Mailing Address					
3 GREENWICH	OFFICE PARK	3 GREENWICH OFFICE PAI GREENWICH CT 06831	RK				
GREENWICH CT	( 06831	GREEWHOT VI COOS.		3. Date Incorporated or Qualified 10/10/1995	3a. Date o		at
2. Principal Place	e of Business	2a. Mailing Address		4, FEI Number			olied For LApplicable
, Miliopai riace of business		26		34-1714149		\$8.75 A	
Suite, Apt. #,	etc.	Suite Apt. #, etc		5. Certificaté of Status Desired		Fee Re	
5 C		City & State		6. Election Campaign Financing		<b>\$5.00</b> Added to	
City & State		28		Trust Fund Contribution  8. This corporation has liability for			
Zip	Country	Zip	Country	Florida Statutes	; XNo		
4	25		30	10. Name and Address of New I	Registered A	gent	
, . <u></u>	9. Name and Address of Curre	III Hegistered Agont	81 Name	·······			
0.7.000	PORATION SYSTEM		82 Street Ad	dress (P.O. Box Number is Not Accepta	ble)		
1200 SOL	UTH PINE ISLAND ROAD						
	10N FL 33324		83			<del></del>	
FLARIA	IOIT I'E GOOE!		84 City		FL	85 Zip i	Code
				the state of	roces of cha	enging its rec	gistered office
11. Pursuant to	the provisions of Sections 607.050	32 and 607.1508, Florida Statutes, and Such change was authorized	, the above named corp Lby the corporation's b	poration submits this statement for the property of directors. Thereby accept the ap	pointment as	registered a	agent. Lam
or registere familiar with	nd agent, or both, in the district of he n, and accept the obligations of, Se Sonature, bosed or protein name of registered ag	etion 607,0505, Florida Statutes.	Fasjistered Agent Synature (C.)	poration submitts this statement for the proport of directors. I heroby accept the appropriate resisting.  ADDITIONS/CHANGES TO OF	DATE FICERS AND	DIRECTOF	3Ş IN 12
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14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if under the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if under the information indicated on the information indicated

SIGNATURE: \_\_\_

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR ELLEN KEATS.

Assistant