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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

| | 1996 | 000 W | DIVISIO | IN OF CORPORA | THOMS | | | | |
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| DOCU 1. Corporation | MENT on Name | # F95 0 | 00005699 | (2) | | | | | |
| LUS | TIG & CO., | INC. | | | | | | | |
| | | | | | | | | | |
| Principal Plac | e of Business | | Mailing Address | | | | | ii enei eiih | |
| 281 NEWGATE LOOP | | | 281 NEWGATE LOOP | | | | | | |
| HEATHHO | W FL 32746 | | HEATHROW FL | 32746 | | | | | |
| | | | | | | 3. Date Incorporated or Qualific 11/22/1995 | ed 3a. Da | ite of Last | Report |
| z. Principal P | Place of Busines | 38 | 2a. Mailing Address | 3 | | 4. FEI Number | t | | Applied For |
| Suite, Apt. | #, etc. | · | Suite, Apt. #, et | c. | | 34-1325074 | | <u> </u> | Not Applicable |
| City & Stat | | · | 27 | | | 5. Certificate of Status Desired | | | 5 Additional Required |
| 3 | ie | | City & State | | | Election Campaign Financing Trust Fund Contribution | , 🗅 | | 00 May Be |
| Zip | | Country | Zip | Count | try | 8. This corporation has liability f | | | ed to Fees |
| 4 | | 5 | 29 | 30 | · · · · · · · · · · · · · · · · · · · | Florida Statutes 🔲 Y | Yes 闪No | | 199.032, |
| | 9. Name a | no Address of Curre | ent Registered Agent | | 11 Name | 10. Name and Address of Nev | v Registered | i Agent | |
| BLAKE | E, MARK T E | so | | | | | | | |
| | | CENTRE DR. | | 8: | Street Add | dress (P.O. Box Number is Not Accept | table) | | |
| LONG | WOOD FL 32 | 2714 | | 8: | 3 | | — <i></i> | • · · · · · · · · · · · · · · · · · · · | |
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| | | | | R | 4 City | | | | |
| 11. Pursuant t | to the provision | s of Sections 607.050 | 02 and 607.1508, Florida St | atutes, the above | 1, | oration submits this statement for the | FL | 85 Z | • |
| OUGNATURY. | | - | | atutes, the above | 1, | oration submits this statement for the pard of directors. Thereby accopt the ap | Purpose of chappointment a | 1 1 | • |
| SIGNATURE. | | ounted name of registered ager | nt and title it applicable | atutes, the above vorized by the cor- utes. | e-named corpo poration's boa | od when renestative | DATE | nanging its s registered | registered offici diagent. Lan: |
| S'GNATURE. | | ounted name of registered ager | | atutes, the above porized by the cor- utes. | named corporporation's boa | | DATE FICERS AN | nanging its s registered | registered office d agent. I am DRS IN 12 |
| BIGNATURE. 112. HILF HAME | Signature typodor p | OFFICERS AN | nt and site it approable ND DIRECTORS | atutes, the above sorized by the corutes. (NOTE Registration Aug. 13. | p-named corporation's boa | od when renestative | DATE FICERS AN | nanging its s registered | registered office d agent. I ans |
| SIGNATURE | P LUSTIG, 281 NEV | OFFICERS AN GREGORY J VGATE LOOP | nt and site it approable ND DIRECTORS | atutes, the above porized by the corutes. NOTE Registrical Agr. 1.1 THEE | p-named corporation's boa | od when renestative | DATE FICERS AN | nanging its s registered | registered offici diagent, I am DRS IN 12 |
| SIGNATURE 12. ITHE ITHE IAME STHEET ADDRESS DEY-ST-ZIP | P LUSTIG, 281 NEV HEATHR | OFFICERS AN | nt and stile in approunte ND DIFFECTORS DELETE | atutes, the above porized by the corrutes. NOTE Registror Ayr. 13. 1.1 Title 12 NAME 13 SIRRE 14 CEY. | p-named corporation's board separation require | od when renestative | DATE FICERS AN | nanging its s registered | registered office d agent. I am DRS IN 12 |
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SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING GENCER OR DIRECTOR

LUSTY 4/15/91 829-2040

Displace Proce