MASSAPEQUA TEMPORARIES IN Principal Place of Business I25 W. COLONIAL DR SUITE 206 ORLANDO FL 32804-6863 2. Principal Place of Business 1 Suite, Apt #, elc 2 City & State 3 Zip Country 4 9. Name and Address of Curr IRWIN, ROBERT E 425 W. COLONIAL DR SUITE 204 ORLANDO FL 32804-6863 11. Pursuant to the provisions of Sections 607.0 office or registered agent, or both, in the St agent 1 am familiar with, and accept the ob SIGNATURE Signature byed or printed name of registered	Mailing Address 425 W. COLONIAL DR SUITE 206 ORLANDO FL 32804-6963 2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 rent Registered Agent 2502 and 607.1508, Florida Statute ate of Florida. Such change was a ligations of, Section 607.0505, Flo	Country 30 81 Name 82 Street 83 SU 84 City 84 City 84 City 85 U 84 City 85 U 85 U 85 U 86 U 86 U 86 U 86 U 87 U 88 U 88 U 88 U 88 U 89 U 89 U 89 U 80 U	11-2330444 Not / 5. Certificate of Status Desired \$8.75 Ad 6. Election Campaign Financing \$5.00 M Trust Fund Contribution Added to 6. This corporation has liability for intangible tax under s. 1 Florida Statutes Florida Statutes Yes 0. Name and Address of New Registered Agent Xon 1+5. Box Inc. Ca Iddress (R.O. Box Number is Not Acceptable) X. Colonial	bort lied For Applicable dditionat uired fay Be Fees 199.032, 000e
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425 W. COLONIAL DR SUITE 204 ORLANDO FL 32804-8863 • Pursuant to the provisions of Sections 607.0 office or registered agent, or both, in the Sta agent Larn familiar with, and accept the ob GNATURE • Signature typed or printed name of registered . • OFFICERS / LE • CP ME • MENICHELLI, MARILYN 7742 GLENDEVON LANE DELRAY BEACH FL 33446 • VOST ME • MENICHELLI, RENO 7742 GLENDEVON LANE DELRAY BEACH FL 33446 • VO ME • KONITS, BARBARA RELADORESS IV-S1-ZIP • ELRAY BEACH FL 33446	agent and tille it applicable. (NOTE	83 SU 84 City es, the above-named authorized by the corp orida Statutes.	5 W. Colonial D He 206 Lando FL 85 Zip Co Corporation submits this statement for the purpose of changing its foration's board of directors. I hereby accept the appointment as re 3/3/1/97	XN/
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IE	DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS	Change	Addition
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(-51-21) F H EEL ADDRESS (-51-24)	DELETE	54 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	Change Change Ated in Section 119.07(3)(i), Florida Statutes. I further certify that the	Addition

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