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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # F96000003527 (6)

FILED Mar 19 1997 8:00am Secretary of State

1.			'S ONE ON ONE,	INC.	,			LICANTO CIUTITATA ARTICALIA ARTICALIA ARTICALIA	[[1]]	1 86 (1 18 6 (118 6
Principal Place of Business Mailing Address										
21	171 N OCEAN OCA MATON	N BLVD VS47		Mailing Address 2871 N OCEAN BLVD V547 80CA RATON FL 33431-7018						
	٠							3. Date incorporated or Qualified 3a 07/10/1996	. Date of Last	Report
2.	. Principal Place of Business			2a. Mailing Address				4. FEI Number	A	oplied For
21	6 11 4 11			26				16-1351394		lot Applicab
22	Suite, Apt. #, etc.			Suite, Apt. #, etc.				5. Certificate of Status Desired	4	Additional Required
23		City & State		City & State		6. Election Campaign Financing Trust Furid Contribution) May Be I to Fees		
	Zip		Country	Zip	├ ──	Country		8. This corporation has liability for intang	ible tax under	
24		o Name	25 and Address of Curre	nt Registered Agent	[30]	_		Florida Statutes Yes 10. Name and Address of New Register		
	SDE			nt trogistion right		61	Name	10, reache and Address of real register	ed Adeitt	
SPECTOR, DAVID 2871 N OCEAN BLVD V547						62	Street Addr	ress (P.O. Box Number is Not Acceptable)	·	
BOCA RATON FL 33431						83		Total Control (1987)		
						03	_			
ŧ.						84	City	F	85 Zip	Code
11	. Pursuant t office or re agent. I ex	to the provis egistered ag m familiar wi	ions of Sections 607.050 jent, or both, in the State th, and accept the oblig	02 and 607,1508, Florida State of Florida, Such change was attons of, Section 607,0505.	utes, the a s authorize Florida Stal	oove d by	e-named corp the corporat	poration submits this statement for the purposition's board of directors. I hereby accept the	e of changing appointment as	ils registere registered
SI	GNATURE .		or printed name of registered ag					red when reinstang) OAT		
12	•		OFFICERS AN	ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTO	RS IN 12
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proby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119 07(3)(i). Florida Statutes. I further certify that the security indicated to the information suppliemental annual report is true and accurate and that my signature small have the same legal effect as if made under qualified or director of the corporation or the receiver or trustee empowered to execute this report as required by Chaptel 607. Florida Statutes: and that my name is not that my

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

Maria free of Parties of Braning of Figer on Director

13/5 561/36 Date Devime Prior

***165.00