MOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISS PROFIT CORPORATION ANNUAL REPORT 1997		DISSOLVED,	SSOLVED ON OR AFTER SEPTEMBER 17, 1997. SOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.) FLORIDA DEPARTMENT OF STATE Bandra B. Mortham Socretary of State DIVISION OF CORPORATIONS			FILED Sep 16 1997 8:00an Secretary of State		
THE CO Principal Place 8 KEEWAYDIN	PORTUE	Ма	iling Address KEEWAYDIN DRIVE					
SALAM NH 03	07 9-4 875	SA	SALAM NH 03079-4875			DO NOT WRITE IN THIS SPACE		
						3. Date Incorporated or Qualified 10/07/1996	3a. Date of Last R	leport
	ace of Business	. ⊢	Mailing Address			4. FEI Number 02-0354937		oplied For
Suite, Apt.	MICHELSON DRIVE	26	3353 MICHELS Suite, Apt. #, etc.			 Certificate of Status Desired 	\$8.75	
City & State		27	#551M City & State			6. Election Campaign Financing	Fee Re	Anter May Ba
IRVIN	E, CA	28	IRVINE, CA			Trust Fund Contribution	Added	to Fees
Zip 92698	Country 25 USA	29	Zip 92698	Country 30 USA		 This corporation owes or has pair Personal Property Tax due June 		angible] No
	9. Name and Address of Cu	urrent Regist	ered Agent	81 Name		Name and Address of New Reg	gistered Agent	
120	CORPORATION SYSTEM 0 SOUTH PINE ISLAND ROA NTATION FL 33324	AD		82 Street	Address	(P.O. Box Number is Not Acceptab	ole)	
120 PLA	O SOUTH PINE ISLAND ROA NTATION FL 33324	7.0502 and 60 State of Florid	17. 1508, Florida Slati la Such change was Soction 607.0505, F	83 84 City authorized by the cor		s (P.O. Box Number is Not Acceptab tion submits this statement for the p 's board of directors. I hereby accep	FL 85 Zip	Code ts registered registered
1200 PLA 11. Pursuant I office or re agent. I ar SIGNATURE	o SOUTH PINE ISLAND ROA NTATION FL 33324 to the provisions of Sections 607 egistered agent, or both, in the S m familiar with, and accept the o	7.0502 and 60 State of Florid obligations of, ed agent and tile i	, Section 607.0505, F	83 84 City authorized by the con lorida Statutes.	l corpora poration	tion submits this statement for the p 's board of directors. I hereby accep	FL 85 Zip purpose of changing if but the appointment as DATE	ts registered registered
120 PLA 11. Pursuant to office or re agent. Lar SIGNATURE 12. TITLE NAME	o SOUTH PINE ISLAND ROA NTATION FL 33324 to the provisions of Sections 607 egistered agont, or both, in the S m familiar with, and accept the of Signature, typed or printed pane of registere OF FICE RS PSDT MCLAUGHLIN, JOHN P 2 KEEWAYDIN DRIVE	7.0502 and 60 State of Florid obligations of,	, Section 607.0505, F	83 84 City les, the above-namod authorized by the con lorida Statutes	l corpora poration	ation submits this statement for the p 's board of directors. I hereby accep	FL 85 Zip purpose of changing if but the appointment as DATE	ts registered registered
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