	PROFIT RPORATION UAL REPORT	Sandra	RIMENT OF STATE B. Mortham		
1996		Secretary of State DIVISION OF CORPORATIONS			
	MENT # G473	95 (0)	<u> </u>		
1. Corporatio		(-)			
		a degigin, ing.			i ê lêkir alalir û leti û kurd alardî û kart û lêkir
Principal Place	e of Business	Mailing Address			
5100 NW 33 FT LAUD FL	IRD AVE., #148 _ 33309	5100 NW 33RD AVE # FT LAUD FL 33309	¢148		
		I BRIGH IN CORE.		3. Date Incorporated or Qualified	
2. Principal F	lace of Business	2a. Mailing Address		06/28/1983 4. FEI Number	04/12/1995 Applied For
21 Suite, Apt	# ot/-	26		59-2298787	Not Applicable
22		Suite, Apt. #, etc. 27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & Stah	0	City & State		6. Election Campaign Financing Trust Fund Contribution	Added to Fees
Zip 24	Country 25	Ζιρ	Country	8. This corporation has liability for	r intangible tax under s 199.032,
	9. Name and Address of Curr	29 ent Registered Agent	30	Florida Statutes Ye 10. Name and Address of New	s No Registered Agent
KUBL	Arthur F Jr		81 Name		
5100 N	W 33RD AVE., #148			idress (P.O. Box Number is Not Accepta	ble}
FT LAU	D FL 33309		83		
			84 City		B5 Zip Code
			1 1		
0.109.200	co agent, or boart in the blate of he		s, the above-named corp of by the corporation's bo	poration submits this statement for the pu pard of directors. I hereby accept the app	
familiar wi	th, and accept the obligations of, So	anda, Subi Fondigo was autorized action 607.0505, Florida Statutes.	s, the above-named corp of by the corporation's bo	oration submits this statement for the po bard of directors. I hereby accept the app	
familiar wi	Signature, band or prived name of rejistered ag	ontra Sub Fenango was autorized option 607.0505, Florida Statutes.	E: Registered Agent signature requi	vec when reinstating)	Irpose of changing its registered office pointment as registered agent. I am
familiar wi SIGNATURE 12.	Sending the obligations of, Sc Sending that or trained name of replaced ago OFFICERS A	ent and the 1 applicable (NOT)	o by the corporation's bo	viec when reinstating)	Irpose of changing its registered office pointment as registered agent. I am
familiar wi SIGNATURE 12.	PTS KUBLI, ARTHUR F JR	colland the targeteable INOTI	E: Registered Agent signature requi	viec when reinstating)	Irpose of changing its registered office pointment as registered agent. I am
familiar wi SIGNATURE 12. TILE NAME	PTS KUBLI, ARTHUR F JR 10759 NW 21ST ST CORAL SPRINGS FL	colland the targeteable INOTI	E-Registered Agent signature requi	viec when reinstating)	DATE
Faciliar wi SIGNATURE 12. THEE NAME SIREET ADDRESS CITY - S ¹ - 7IP THEE	PTS KUBLI, ARTHUR F JR 10759 NW 21ST ST CORAL SPRINGS FL DV	colland the targeteable INOTI	E: Registered Agent signature requi	viec when reinstating)	Irpose of changing its registered office pointment as registered agent. I am
facoliar wi SIGNATURE 12. THEE NAME STREET ADDRESS CITY-S1-70	PTS KUBLI, ARTHUR F JR 10759 NW 21ST ST CORAL SPRINGS FL DV KUBLI, ELOISE 10759 NW 21ST ST	Internation 607.0505, Florida Statutor. International Control (NOT) IND DIRECTORS	E: Registered Agent signature requi	viec when reinstating)	PL Irpose of changing its registered office pointment as registered agent. I am Date FICERS AND DIRECTORS IN 12 Change Addition
SIGNATURE 12. TITE NAME SIBLET ADDRESS CITE ST- 202 TITE NAME SIBLET ADDRESS CITE ST- 202	PTS KUBLI, ARTHUR F JR 10759 NW 21ST ST CORAL SPRINGS FL DV KUBLI, ELOISE 10759 NW 21ST ST CORAL SPRINGS FL	IND DIRECTORS	E ⁻ Registered Agent signature requination is the component signature requination of the second secon	veo when reinstating) ADDITIONS/CHANGES TO OF	PL Irpose of changing its registered office pointment as registered agent. I am DATE FICERS AND DIRECTORS IN 12 Change Addition Change Addition
SIGNATURE 12. TITE NAME SIREELADDRESS CITE ST- 702 T-TLE NAME STREELADDRESS	PTS KUBLI, ARTHUR F JR 10759 NW 21ST ST CORAL SPRINGS FL DV KUBLI, ELOISE 10759 NW 21ST ST CORAL SPRINGS FL AT	Internation 607.0505, Florida Statutor. International Control (NOT) IND DIRECTORS	E: Registered Agent signature requi	viec when reinstating)	PL Irpose of changing its registered office pointment as registered agent. I am Date FICERS AND DIRECTORS IN 12 Change Addition
Familian wi SIGNATURE 12. THTE NAME SIREELADDRESS CITY-ST-70 THE NAME SIREELADDRESS CITY-ST-70 THE THE THE THE THE	PTS KUBLI, ARTHUR F JR 10759 NW 21ST ST CORAL SPRINGS FL DV KUBLI, ELOISE 10759 NW 21ST ST CORAL SPRINGS FL AT INGRAM, DIANA 3736 SATIN LEAF CT.	IND DIRECTORS	E ⁻ Registered Agent signature requination is the component signature requination of the second secon	veo when reinstating) ADDITIONS/CHANGES TO OF	PL Irpose of changing its registered office pointment as registered agent. I am DATE FICERS AND DIRECTORS IN 12 Change Addition Change Addition
familiar wi SIGNATURE 12. THEE NAME SIREELADDRESS CITY-S1-ZIP THEE NAME SIREELADDRESS CITY-S1-ZIP TH.E NAME SIREELADDRESS CITY-S1-ZIP	PTS KUBLI, ARTHUR F JR 10759 NW 21ST ST CORAL SPRINGS FL DV KUBLI, ELOISE 10759 NW 21ST ST CORAL SPRINGS FL AT INGRAM, DIANA	INDEDIFICTIONS AUTORIZED INOT	E: Registered Agent signature requinance agent signature requinance requinance agent signature agent	veo when reinstating) ADDITIONS/CHANGES TO OF	
Fachliar Wi SIGNATURE 12. THEE NAME SIREELADDRESS CITY-ST-7R THEE NAME SIREELADDRESS CITY-ST-2R THEE NAME STREELADDRESS	PTS KUBLI, ARTHUR F JR 10759 NW 21ST ST CORAL SPRINGS FL DV KUBLI, ELOISE 10759 NW 21ST ST CORAL SPRINGS FL AT INGRAM, DIANA 3736 SATIN LEAF CT.	IND DIRECTORS	E: Rogistared Agent signature requinance agent signature requinance requinance requinance agent and a signature requinance agent agent signature requinance	veo when reinstating) ADDITIONS/CHANGES TO OF	PL Irpose of changing its registered office pointment as registered agent. I am DATE FICERS AND DIRECTORS IN 12 Change Addition Change Addition
Facoliar wi SIGNATURE 12. THEE NAME SIREELADDRESS CHY-ST-7R THEE NAME SIREELADDRESS CHY-ST-7P THEE NAME STREELADDRESS CHY-ST-7P THE	PTS KUBLI, ARTHUR F JR 10759 NW 21ST ST CORAL SPRINGS FL DV KUBLI, ELOISE 10759 NW 21ST ST CORAL SPRINGS FL AT INGRAM, DIANA 3736 SATIN LEAF CT.	INDEDIFICTIONS AUTORIZED INOT	E-Registered Agent signature required by the corporation signature required agent signature signature signature signature required agent signature	veo when reinstating) ADDITIONS/CHANGES TO OF	
Facoliar wi SIGNATURE 12. TITE NAME SIREELADORESS CITY-ST-7/P THE NAME STREELADORESS CITY-ST-7/P THE NAME STREELADORESS CITY-ST-7/P THE NAME STREELADORESS CITY-ST-7/P	PTS KUBLI, ARTHUR F JR 10759 NW 21ST ST CORAL SPRINGS FL DV KUBLI, ELOISE 10759 NW 21ST ST CORAL SPRINGS FL AT INGRAM, DIANA 3736 SATIN LEAF CT.		E- Registered Agent signature requination Signature requination of the component signature requination of the second sis a second signature requination of the second signatu	veo when reinstating) ADDITIONS/CHANGES TO OF	
Facoliar wi SIGNAT URE 12. TITLE NAME SIREELADORESS CITY-ST-7R TITLE NAME STREELADORESS CITY-ST-7R TITLE NAME STREELADORESS CITY-ST-7P TTLE NAME STREELADORESS	PTS KUBLI, ARTHUR F JR 10759 NW 21ST ST CORAL SPRINGS FL DV KUBLI, ELOISE 10759 NW 21ST ST CORAL SPRINGS FL AT INGRAM, DIANA 3736 SATIN LEAF CT.	INDEDIFICTIONS AUTORIZED INOT	C: Registered Agent signature requination is to a second signature requination of the second signatur	veo when reinstating) ADDITIONS/CHANGES TO OF	
Facoliar wi SIGNATURE 12. TITLE NAME SIREELADORESS CITY-ST-7P TITLE NAME STREELADORESS CITY-ST-7P TITLE NAME STREELADORESS CITY-ST-7P TITLE NAME STREELADORESS CITY-ST-7P TITLE	PTS KUBLI, ARTHUR F JR 10759 NW 21ST ST CORAL SPRINGS FL DV KUBLI, ELOISE 10759 NW 21ST ST CORAL SPRINGS FL AT INGRAM, DIANA 3736 SATIN LEAF CT.		E- Registered Agent signature requination Signature requination of the component signature requination of the second sis a second signature requination of the second signatu	veo when reinstating) ADDITIONS/CHANGES TO OF	
Fachliar Wi SIGNAT UFIE 12. TITLE NAME STREET ADDRESS OTY: ST-7P TITLE NAME STREET ADDRESS OTY: ST-7P TITLE NAME STREET ADDRESS OTY: ST-7P TITLE NAME STREET ADDRESS OTY: ST-2P TITLE NAME STREET ADDRESS OTY: ST-2P	PTS KUBLI, ARTHUR F JR 10759 NW 21ST ST CORAL SPRINGS FL DV KUBLI, ELOISE 10759 NW 21ST ST CORAL SPRINGS FL AT INGRAM, DIANA 3736 SATIN LEAF CT.	INDEDIRECTORS	E: Registered Agent signature requined by the corporation signature requined as the second signature requires as the second sis the second signature requires as the	veo when reinstating) ADDITIONS/CHANGES TO OF	
Facoliar wi SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-S1-7P TITLE NAME STREET ADDRESS CITY-S1-7P TITLE NAME STREET ADDRESS CITY-S1-2P TITLE NAME STREET ADDRESS	PTS KUBLI, ARTHUR F JR 10759 NW 21ST ST CORAL SPRINGS FL DV KUBLI, ELOISE 10759 NW 21ST ST CORAL SPRINGS FL AT INGRAM, DIANA 3736 SATIN LEAF CT.		E: Registered Agent signature required by the corporation signature required agent sis signature	veo when reinstating) ADDITIONS/CHANGES TO OF	
Fachliar Wi SIGNAT UPE 12. THEF NAME SIREELADORESS CHY-ST-7P THEF NAME STREELADORESS CHY-ST-7P THEF NAME STREELADORESS CHY-ST-7P THEF NAME STREELADORESS CHY-ST-7P THEF	PTS KUBLI, ARTHUR F JR 10759 NW 21ST ST CORAL SPRINGS FL DV KUBLI, ELOISE 10759 NW 21ST ST CORAL SPRINGS FL AT INGRAM, DIANA 3736 SATIN LEAF CT.	INDEDIRECTORS	E: Registered Agent signature requined by the corporation signature requined as the second signature requires as the second sis the second signature requires as the	veo when reinstating) ADDITIONS/CHANGES TO OF	
Fachliar Wi SIGNAT UFIE 12. TITLE NAME STREET ADDRESS OTY - ST- 7P T-TLE NAME STREET ADDRESS OTY - ST- 2P TTLE NAME STREET ADDRESS OTY - ST- 2P TTLE NAME STREET ADDRESS OTY - ST- 2P TTLE NAME STREET ADDRESS OTY - ST- 2P	PTS KUBLI, ARTHUR F JR 10759 NW 21ST ST CORAL SPRINGS FL DV KUBLI, ELOISE 10759 NW 21ST ST CORAL SPRINGS FL AT INGRAM, DIANA 3736 SATIN LEAF CT. DELRAY BEACH FL		E: Registered Agent signature requined 13. 1 11/LE 1 2 NAME 1 3 STREET ADDRESS 1 4 CITY - ST - ZIP 2 1 TITLE 2 2 NAME 3 3 STREET ADDRESS 3 4 CITY - ST - ZIP 4 1 TITLE 4 2 NAME 4 3 STREET ADDRESS 4 4 CITY - ST - ZIP 5 1 TITLE 5 2 NAME 5 3 STREET ADDRESS 5 4 CITY - ST - ZIP 6 1 TITLE 6 2 NAME 6 3 STREET ADDRESS 6 4 CITY - ST - ZIP	ADDITIONS/CHANGES TO OF	
facoliar wi SIGNATURE 12. TITLE NAME STREET ADDRESS CITY - ST - 7P TITLE NAME STREET ADDRESS CITY - ST - 2P TITLE NAME STREET ADDRESS CITY - ST - 2P	Certify that the information supplied	Avith this filing is voluntarily furnis	E: Registered Agent signature requined by the corporation signature requined as the second signature requined and does not qualify the second signature requined and second signature requined as the second signature requined and second signature requined and second signature requirement is the second signature requirement is the second signature requirement is the second second signature requirement is the second second signature requirement is the second secon	veo when reinstating) ADDITIONS/CHANGES TO OF	