PRO CORPO ANNUAL 19	OFIT DRATION L REPORT 1996	96: \$225 (IF DISSOLV	FLORIG	DA DEPARTM Sandra B N Secretary of SION OF COR	OF STATE ram rate RATIONS		
OCUMI orporation Na	ENT #	H56200	(	9)			
JAMES P. WIRTZ CORPORATION							<u> </u>
cipal Place of			Mailing Addre				
e. Las olas Lauderdale	S BLVD. E FL 33301		PO BOX 2164 FT. LAUDERD	ALE FL 33303		3. Date Incorporated or Qualified 05/09/1985	04/06/1995
Principa! Plac	ce of Business		2a. Mailing Ad	dress		4. FEI Number 59-2577589	Applied For Not Applicable
Suite. Apt #,	elc	<u></u>	Suite, Apt	#, etc		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State			27 City & Sta	te		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zıp		Country	28 Zip		Country	8. This corporation has liability for	ir intangible tax under s 199 032, Yes No
	25	Address of Current	29	30	<u> </u>	Florida Statutes  10. Name and Address of New F	
FT. L	e. Las Olas Lauderdale	FL 33301			83   84   City		FL 85 Zip Code
Pursuant to office or regagent. I am	o the provisions gistered agent, n tamiliar with, a	of Sections 607.0502 or both, in the State and accept the obliga	ations of, Section 6	607.0505, Floric	84 City  the above-named corporated by the corporated Statutes	poration submits this statement for the ion's board of directors. Thereby according to the control of the contr	FL In a its registered
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