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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #
1. Corporation Name J09799

| DEVET ODERS | CONCURICTION | CORPORATION |
|-------------|--------------|-------------|

| Principal Place | of Business | Mailing Address | | | | |
|--|--|--|---------------------------|---|--|--|
| | OUTHERN BOULEVARD | 10397 SOUTHER | | | | |
| ROYAL PA | ALM BEACH, FL 33411 | ROYAL PALM B | EACH, | FL 334 | :11 | |
| | | | | | 3. Date Incorporated or Qualifi | ed 3a. Date of Last Report |
| | | | | | 04/17/1986 | 04/04/95 |
| 2. Principal Pla | ace of Business | 2a. Mai ing Address | | | 4. FEI Number | Applied For |
| 10323 | SOUTHERN BLVD. | ₂₆ 10323 SOUT | HERN I | BLVD. | 59-2686152 | Not Applicable |
| Suite, Apt # | ¥. etc | Suite, Apt. #. etc. | | | 5. Certificate of Status Desired | \$8.75 Additional |
| 22 | | 27 | | | | Fee Required |
| City & State | PALM BEACH, FL | City & State ROYAL PALM | BEACT | . एस म | 6. Election Campaign Financin | |
| | Country | Zip Zip | Cou | | Trust Fund Contribution | Added to Fees for intangible tax under s. 199.032, |
| Zip | 33411 25 USA | 29 33411 | 30 | USA | Florida Statutes | |
| 24] | 9. Name and Address of Current | 11 | 1301 | ODZ | 10. Name and Address of New | |
| | 3. Italia and Address of Canton | Tregisterou Pigott | | 81 Name | | |
| מות | די ייי אודאאדי ד | | | | PATRICIA BALCH | atable) |
| ABLE, DIANE L. 10397 SOUTHERN BOULEVARD | | | | Street Address (P.O. Box Number is Not Acceptable) 10323 SOUTHERN BOULEVARD | | |
| | YAL PALM BEACH, FL 3 | | | 83 | | |
| RO | IAL PALP BEACH, TI. | 12411 | | | | lar Zo Codo |
| | | | | 84 City | ROYAL PALM BEACH | FL 85 Zip Code 33411. |
| 11. Pursuant to | o the provisions of Sections 607.0502 | and 607.1508, Florida Statu | tes, the at | oove-named | corporation submits this statement for to poration's board of directors. I hereby a | he purpose of changing its registered |
| office or re | egistered agent,)ir both, in the State on familiar with, and accept the obligat | of Florida. Such change was ions. Section 607,0505. F | autnorizet Iorida Stat | d by the cor utes. | poration's board of directors. I hereby a | ccept the appointment as registered |
| SIGNATURE | (Sature | Sall | Patri | cia Ba | 1ch 4/25 | /96 |
| SIGNATURE | Signature typed or printed name of registered ago | and title 1 applicable (NC | 1 Hegistere | d Agent signaturi | required when reinstating) | DATE |
| 12. | OFFICERS AND | | 13. | | ADDITIONS/CHANGES TO C | FFICERS AND DIRECTORS IN 12 Change Addition |
| TITLE | PD | [_] DELETE | 117 | | | CT custile C 1 vegition |
| NAME | MILLER, ROBERT L. | | 1 2 N/ | | | |
| STREET ADDRESS | 10397 SOUTHERN BLVI | | | REET ADDRESS | | |
| CITY ST ZIP | ROYAL PALM BEACH FI | _ 33411 | | TY-ST-ZIP | | Change Addition |
| TITLE | V | = : | 2 1 T | | | Ell Stidings Ell Maderian |
| NAME | AUSTIN, CHRISTOPHER | | 22 N | | | |
| STREET ADDRESS | 10397 SOUTHERN BLVI | = | | REEL AODRESS | | |
| CITY - ST - ZIP | ROYAL PALM BEACH, I | X DELETE | 3 1 T | TY-ST-ZIP | ST | Change X Addition |
| TITLE | ST | Morrit | 3 2 N | | BALCH, PATRICIA | Entrange Entrange |
| NAME | ABLE, DIANE | | | tree i adoress | l ' | TANDI |
| STREET ADDRESS | 10395 SOUTHERN BLVI | | | TY-S1-ZIP | ROYAL PAIM BEACH, FI | |
| CITY-ST ZIP | ROYAL PALM BEACH, I | FI. 33411 DELETE | 4 1 7 | | WIAL FALL DEACH, F. | Change Addition |
| NAME | | | 4 2 N | | | 1.10.6 |
| STREET ADDRESS | • | | | TREET ADDRESS | 1 | 11146 |
| CITY-ST-ZIP | | | | ITY - ST - ZIP | 1 | 1'' (<i>")</i> " |
| TITLE | | DELETE | 5 1 T | | | Change Ado tion |
| NAME | | | 52 N | | | |
| STREET ADDRESS | | | | TRECT ADDRESS | 2000018 | 511 (4 <i>e</i>) |
| CHTY-ST-ZIP | | | | ITY-ST-ZIP | -05/07/960 | 1125013 |
| TITLE | | DELETE | 6 1 7 | | ***200.00 | Change Addition |
| NAME | | | 6 2 N | AME | | |
| STREET ADDRESS | | | 635 | TREET ADDRESS | | |
| CiTY-S1-ZIP | | | | ITY-ST-ZIP | | |
| | | | | | in the state of the Committee of the Com | Control of the Contro |

14. I do hereby certify that the information supplied with this fixing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attachment with an address.

SIGNATURE!

Mile Patricia
E AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Patricia Balch

(407) 790-1414

Daytime Phone #