COF ANNI DOCU	PNOTICE: CORPORATION WILL BE ON OR BEFORE 8/7/96: \$225 (IF DISS PROFIT RPORATION UAL REPORT 1996	FLORIDA DEPA Sandra Secrete DIVISION OF	UE TO REINS RTMENT OF B. Mortham ary of State	STATE: \$375.) STATE		
Principal Place of Business P.O. BOX 4263 18249 131ST TERRACE JUPITER. FL. TEQUESTA FL 33469 P.O. BOX 4263 18249 131ST TERRACE JUPITER. FL. TEQUESTA FL 33469 2a. Mailing Address					3. Date Incorporated or Qualified 05/04/1987 4. FEI Number	3a. Date of Last Report 05/01/1995 Applied For
Suite, Apt	#, etc	26 Suite, Apt #, etc			59-2816815	Not Applicable
22 City & Stat 23	27				Certificate of Status Desired Election Campaign Financing Trust Fund Contribution	\$8.75 Additional Fee Required \$5.00 May Be Added to Fees
Z(p 24	Country 25 9. Name and Address of Curren	Z(p)	Count 30	у	This corporation has liability for Florida Statutes	intangible tax under s. 199.032, Yes No
11. Pursuant: office or n	IEENBERG, WILLIAM H. 92 152ND PLACES. LRAY BCH FL 33446 to the previsions of Sections 607.050, equating of the State of the International PLACES.	and 607.1598) Florida Statuti of Florida Zucy change was a tions of Section 607.0505, Flo	8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8 8	2 Street Addr 3 4 City	ress (P.O. Box Number is Not Acceptab oration submits this statement for the pron's board of directors. I hereby accept	E1 85 <i>Z</i> ₁ p Code
SIGNATURE	Signaline typed or printed name of registered ager	ntin titile il poplicable (NOT		gent signature requir	ed when reinstating)	CIANE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GREENBERG, WILLIAM 8892 152ND PLACE S. DELRAY BEACH FL	DELETE DELETE	13. 1 1 TITLE 1.2 NAME 1 3 STREE 1.4 CITY-	TADDRESS	ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTORS IN 12 \$60 \$70 \$70 \$70 \$70 \$70 \$70 \$70 \$70 \$70 \$7
TITLE NAME STREET ADDRESS CHY-ST-ZIP	D Fisher, Morgan T. 8892 152ND Place S. Delray Beach Fl	DELETE	2 1 TITLE 2 2 NAME	T ADDRESS		Change Add:tion
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Baglia, Joseph C., Jr 8892 152ND Place S. Delray Beach Fl	DELETE	3 1 TITLE 3 2 NAME 3 3 STREE 3 4 CITY	f address Sf-Zip		Change Addit on
NAME STREET ADDRESS CITY-S1-ZIP		DELETE	4.1 TIFLE 4.2 NAME 4.3 STREE 4.4 CITY -	1 ADDRESS		Change Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		[_] DELETE	5.1 TITLE 5.2 NAME 5.3 STHEET ADDRESS 5.4 CITY - ST - ZIP			Change Addition
NAME STREET ADDRESS CITY-ST-ZIP 14. I do hereb	y certify that the information supplied	DELETE with this filing is voluntarily fur	64 CITY-	doce not qualit	fy for the exemption stated in Section 1	Change Addition
made und	er oath, that I any an officer or director me appears in Block 1/ or Block 1/)	his agrued report or supplier of the colporation of the colporation of the recolporation of the recommendation of	ntai annuai i liver or trusti t with an add	eport is true ai	ty for the exemption stated in Section 1 nd accurate and that my signature shall to execute this report as required by C	19 07(3)(k). Florida Statutes I have the same legal effect as if napter 617, Florida Statutes, and