FILE	E NOW: FII	LING FEE A	FTER MAY 1	S \$	5.	00						
COR ANNL	PROFIT CORPORATION ANNUAL REPORT 1996		FLORIDA DEPARTMEN Sandra B. Mori Secretary of S DIVISION OF CORPO		SOF STATE							
DOCUMENT # <b>J77389</b>				/1)								
1. Corporation	n Name		( ' /									
KING	NICHAND CAD	NO. 1113, IN	<b>.</b>									
Frincipal Place of Business Mailing Address							I TOBATEC BERL 18011 AND			I OIDH OIDH		
19321 NE 18TH COURT 19321 NE 18TH COURT N. MIAMI BEACH FL 33179 N. MIAMI BEACH FL 3313												<b>-</b> .
				<u> </u>		06/05/1987		1	te of Last Report 04/04/1995			
2. Principal Pla	ace of Business		2a. Mailing Address 26	· [			4. FEI Number 65-0032994				pplied For ot Applicable	4
Suite, Apt. #	#, etc.		Suite, Apt. #, etc.				5. Certificate of Status D	esired		\$8.75	Additional equired	
Oty & State			City & State				6. Election Campaign Fir Trust Fund Contribution	-	S5.00 May B			
Ζιρ <b>24</b> ]	25	untry	Zip 29	30	intry		This corporation has I Florida Statutes	ability or Yes		cunder s	199.032,	
	9. Name and A	dress of Current F	Registered Agent				10. Name and Address	of New F	Registered A	gent		7
				i	81	Name						
	SKY, WALTER S. E 162ND ST				82	Street A	ddress (P.O. Box Number is Not	Acceptat	/ek	·		
	E 102ND 31 AI BEACH FL 331	179			83							1
11. 10.00 20.					84	City				85 Zip	Code	+
11 Purcuant to	o the provisions of S	Sections 607 0502 a	nd 607 1508 Etorida Stabili	os tho ab		•	reporation cultivate this statement	for the ou	FL rose of cha	nging its re	nistared office	<u> </u>
or registere familiar wit	ed agent, or both, in h, and accept the o	the State of Florida bligations of, Section	Such change was authoriz 607.0505, Florida Statutes	ed by the	corpo	oration's b	rporation submits this statement poard of directors. I hereby accept	of the app	ointment as	registered	agent. I am	
SIGNATURE _	Skautine, typed or printed a	name of registered agent and	Litre 4 applicable (NC	Tt. Register	d Agen	t signature re	quired when reinstating)		DATE			
12.		OFFICERS AND I	DIRECTORS	13.			ADDITIONS/CHANGE	S TO OF				E034 (12/95)
THEE	PD		☐ DELETE	1.1	TITLE					Change	Addition	=
NAME STREET ADDRESS	CORDES, RIC				1.2 NAME 1.3 STREET ADDRESS							엉
CITY - ST - ZIP	19321 NE 18 N MIAMI BEA				CITY - S							
11116	VD VD	Y11.1.1	DELETE		TITLE	···				Change	Addition	⊣წ
NAME	CORDES, PA			22	NAME							
STREET ADDRESS	19321 NE 18					ADDRESS						
CHY-SI-ZIP THLE	N MIAMI BEA	CH FL	DELETE		CITY - S	T-ZIP				Change	☐ Addition	$\dashv$
NAMI	D Cordes, Ric	HARD JR	been		NAME				-			
STREET ADORESS	19321 NE 18					ADORESS						
CHY-\$1-709	N MIAMI BEA			34	CITY-S	1 - ZIP			, <u></u>			
TITLE	D		☐ DELETE		TITLE				Ξ	] Change	Addition	
NAME	BENTON, DE				NAME							
STREET ADDRESS   CHY-ST-ZIF	19315 NE 18 N MIAMI BEA				STREET City-s	ADDRESS 1.71P				• •		
TIBLE	I MICHIEDEA	VIII E	DELFTE		TITLE					Change	Addition	~{
NAME				52	NAME							
STREET ADDRESS				53	STREET	ADDRESS						
CHY ST ZIP			F) butter		DiTY-S	T-ZIP			<u>-</u>	T 0	<b>[</b> ]	_
THILE			DEFEIE		TiTLE	ŀ			Ĺ	] Change	☐ Addition	

64 CiTY-ST-ZiP 14. I do hereby certify that the information supplied with this filing 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Date

Date

Description 1.19.07(3/k), Florida Statutes. I further certify that the information supplied with this filing 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 supplied with this filing 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 supplied with this filing 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 armula report of the corporation of the corpo

63 STREET ADDRESS

STREET ADDRESS

914. 438.5994 Dayling Prone!