FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

	JAL REPORT 1996			tary of State CORPORATIONS			
DOCU 1. Corporation	MENT #	J82599	(8)				
·	TRONG LANDS	Caping, Inc.					
Principal Place	of Purings		A				
Principal Place of Business 1455 STACY STREET NORTH			Mailing Address 1455 STACY STREET NORTH				
	EACH FL 33417		W. PALM BEACH FL 3				
-·					3. Date Incorporated or Qualified 07/13/1987	3a. Date of Last Re 03/24/199	
2. Principal Pl	lace of Business	<u> </u>	2a. Mailing Address 6		4. FEI Number 59-2760761	j	Applied For
Suite, Apt.	#, etc.		Suite, Apt. #, etc.			\$8.75	Not Applicable Additional
22		2	l		5. Certificate of Status Desired	1 1	Required
City & State	· · · · · · · · · · · · · · · · · · ·	2			6. Election Campaign Financing Trust Fund Contribution		May Be I to Fees
Zip 24	25	intry 2	Zip g	Country 30	8. This corporation has liability for in Florida Statutes	ntangible tax under s	199.032,
		dress of Current Reg		190	10. Name and Address of New Ro		
				81 Name			
ARMSTRONG, TED 1455 STACY STREET NORTH				82 Street Add	ress (P.O. Box Number is Not Acceptabl	le)	
W. PALI	M BEACH FL 3341	7		63			
				84 City		FL 85 Zip	Code
familiar wit			607.1508, Florida Statute uch change was authorize 17.0505, Florida Statutes		ration submits this statement for the purp and of directors. I hereby accept the appo	pose of changing its re pintment as registered a	igistered office agent. I am
	Signature typical or printed ha	and of registered agest and the	e if applicable (NO	TE Registered Agent signature require	ed when reinstaling)	DATE	
12.	7 - 2	of registered agest and the OFFICERS AND DIR	erapikalio (NO ECTORS	TE Registered Agent signature require	of when rensaling) ADDITIONS/CHANGES TO OFFICE	CERS AND DIRECTOR	
12.	D	OFFICERS AND DIR	e if applicable (NO	TE Registered Agent signature require 13. 1 1 TiTLE			RS IN 12
12. 1 ILE NAME	D Armstrong, (OFFICERS AND DIR	erapikalio (NO ECTORS	TE Registered Agent signature recovere 13. 1 1 TITLE 1 2 NAME		CERS AND DIRECTOR	
12. Title NAME Sireel Address	D	OFFICERS AND DIR CAROL T. NORTH	erapikalio (NO ECTORS	13. 1 1 TITLE 12 NAME 1 3 STREET ADDRESS		CERS AND DIRECTOR	
12. 1 Tue NAME S'REEL ADORESS OHY-ST-ZIP	D ARMSTRONG, 1 1455 STACY S' W. PALM BEAC D	OFFICERS AND DIR CAROL T. NORTH CH FL	erapikalio (NO ECTORS	TE Registered Agent signature recovere 13. 1 1 TITLE 1 2 NAME		CERS AND DIRECTOR	
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