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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

OCUM Corporation N		522	(1)	
BOOTS	sy enterprises., inc) .		<u> </u>
rincipal Place o	of Business	Mailing Address		
13950 NW 22ND AVE. OPA-LOCKA FL 33054		13950 NW 23 OPA-LOCKA	2ND AVE.	
				3. Date Incorporated or Qualified 3a. Date of Last Report 02/19/1988 04/25/1995
Principal Place of Business		2a. Mailing Address		4. FET Number Applied For
Suite, Apt. #, etc.		26 Suite, Apt. #,	, etc.	\$8.75 Additional
City & State		27 City & State		5. Centificate of States Desired XX Fee Required
Oity & Olene		28 Z8		6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
Zip	Country 25	Zip 29	Country 30	 This corporation has liability for intangible tax under sides 199.032, Florida Statutes → Yes □ No
	g, Name and Address of Cu			10. Name and Address of New Registered Agent
WHITE, I	DAVID A.		81 Narm	
13950 N	IW 22ND AVE.			ot Address (P.O. Box Number is Not Acceptable)
OPA-LO	CKA FL 33054		63	
			84 City	FL 85 Zip Code
S,	PSTD WHITE, DAVID A.	S AND DIRECTORS	(NOTE: Registers i April signatur 13. ETE 1 1 TITLE 1.2 NAM:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
GEL ADORESS	15545 NW 158TH ST. R OPA-LOCKA, FL. 33054	•	1.3 STREET ADDRESS	5
Y-ST ZIP F		DELE	1 4 CHY-ST-ZIP 2 1 THE	Change Addition
AF			2 2 NAME	
EET ADDRESS Y-ST-ZIP			2 3 STRFET ADOMESS 2 4 City - S1 - Zip	
f		□ DEFE	P	Change Addition
tet aduress			3 2 NAME 3 3 STREFT ADDRES:	s
'-S'-7IP E		DELE	3.4.C(TY+S(+Z)P ETE 4.1.T(T,E	☐ Change ☐ Addit:
11:			4 2 NAME	
ELI ADDRESS			4 3 STREET ADDRESS	
-\$1-ZiP		DELE	44 CITY - ST- ZIP ETE 5 : TITLE	Change Addit.o
t ADDOCCO			5.2 NAME	
FELADDRESS - ST-7IP			5 3 STREET ADDRESS 5 4 CITY - ST - ZIF	
F		[] DELE		☐ Change ☐ Addit of
ļ			6.2 NAME 6.3 STREET ADDRESS	
r-St ZiP			6 4 C/TY - ST - Z P	
ME HEET ADDRESS IY-SE ZIP I, I do hereby of certify that the oath; that I a	certify that the information supplies information indicated on this anian cofficer of director of the c	lied with this filing is volunts annual report or supplement proporation or the receiver of	6 4 0/1Y - ST - Z P	ualify for the exemption stated in Section 119.07(3/k), Florida Statutes accurate and that my signature shall have the same legal effect as if mute this report as required by Chapter 607, Florida Statutes, and that r

SIGNATURE: Non David White, President

03/01/96

Dajtine Phone #