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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

OCUN Corporation N IVES R		32	(8)				14 <b>0</b> 1841 <b>0</b> 4011 1004
rincipal Place o	'Business	Mailing Adde	ess				
* MARGUERITE ARIAS 1201 S.OCEAN DR SUITE 219 - SOUTH HOLLYWOOD FL 33019  **MARGUERITE A 1201 S.OCEAN DR HOLLYWOOD FL 33019			UERITE ARIAS ICEAN DR., SI	UITE 219 - SOUTH	Date Incorporated or Qualified	3a. Date of Last Re	ecort
					01/25/1989	03/14/1	'
Principal Pac	e of Business	2a. Mailing A	ddress		4. FEI Number	<b>├.</b> - <b>-</b>	Applied For
Suite Ant #	ote	26 Suite, Ap	t # etc	The state of the s	65-0095916		Not Applicable  Additional
- Suite, Apt. #, 	Çit.,	27	ι. <del>π</del> , εις.		5. Certificate of Status Desired	<b>4</b>	Required
City & State		Oity & Sta	ate		Election Campaign Financing     Trust Fund Contribution		May Be
Zip	Country	7 <sub>0</sub>		Country	This corporation has liability for in		to Fees 199.032.
·	[25]	29		30	Florida Statutes  Yes		,
	g. Name and Address of Curre	ent Registered Age	ent	Q4 Name	10. Name and Address of New Ro	egistered Agent	
				81 Name			
	MARGUERITE	NI ITU		82 Street Add	ress (P.O. Box Number is Not Acceptabl	le)	
	. Ocean dr., suite 219 - sc Vood Fl 33019	JUIN		83			
HULLIY	1000 LF 22019			<b>P4</b> 00		leel 7	0-4-
				84 City		FL  85   Zij	o Code
or registered	the provisions of Sections 607.050 d agent, or both, in the State of Flo , and accept the obligations of, Sec	rida. Such change v	vas authorized	s, the above named corpo d by the corporation's boa	oration submits this statement for the purp and of directors. I hereby accept the appo	pose of changing its r pintment as registered	egistered office agent. I am
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