HE CENTER FOR EYE SURGERY, INC.     tipal Place of Business   Mairing Address     N. Pre ELAMO ROAD   377 N. PRE ELAMO ROAD     Size F. 3050   300 NOT WRITE IN THIS SPACE     3 State   28     170 Or 6 State   21     171 Or 6 State   21     172 Or 6 State   21     173 N. PRE ELAMO ROAD   21     174 State Control Comparison owns the numeric state thread	PROFIT CORPORATION ANNUAL REPORT <b>1999</b>	Kather Secreta DIVISION OF	RTMENT OF STATE ine Harris any of State CORPORATIONS	FILE Feb 20, 1999 Secretary 0 02-20-1999 90140 02	8:00 am State
Open Hase of Business     Mailing Address       377 A. PRE (SLAM ORAD       String A. PRE (SLAM ORAD	Corporation Name				
SKE FL 2031   SUNNISE FL 2031   DO NOT WRITE IN THIS SPACE     3. Date Incorporated or Outlided 01/27/1989   Applied Pro- merced   Applied Pro- merced   Applied Pro- merced     Wind, Apt. #, etc.   Sulte, Apt. #, etc.   Sulte, Apt. #, etc.   Sulte, Apt. #, etc.     27   Sulte, Apt. #, etc.   Sulte, Apt. #, etc.   Sulte, Apt. #, etc.     28   Sulte, Apt. #, etc.   Sulte, Apt. #, etc.   Sulte, Apt. #, etc.     29   Country   E. Election Campaign Financing   Status Desired     29   Country   E. Election Campaign Financing   Status Desired     20   Paranual Property Tax.   Yo   No     20   Country   E. Biccoin Campaign Financing   Status Desired     21   20   Country   E. Biccoin Campaign Financing   Status Desired     22   20   Country   E. Biccoin Campaign Financing   Status Desired     22   20   Country   E. Biccoin Campaign Financing   Status Desired     23   Marene and Address of Currant Registered Agent   Financing   Status Desired   Status Desired     24   Shore Address of Rev Registered   Status Desired   Status Desired<	incipal Place of Business	Ū		I ISTUDIO DIVENINO DI VILLO DI VILI DI VILLO DI VILLO DI VILLO DI VILLO DI VILLO DI VIL	I UIUII UIUII DIGII 81011 61611 (80)
Introduct Place of Business     Za.     Mailing Address     4. FEI Number     Applied Fer       Suite, Apl. #, etc.     28     Suite, Apl. #, etc.     5. Certificate of Status Desired     B. 75. Address       Sty & State     21     Suite, Apl. #, etc.     5. Certificate of Status Desired     B. 75. Address       Sty & State     Clip & State     Elicitori Campiang Property Tand Contribution     Address of New Registered Agent     Address of New Registered Agent       Sty & State     20     Country     B. This corporation owas the current year Integritie     Name       CO HALEY, NAKORA AND PEREZ, P.A.     10     Name     Name     Name       ENGLERT, RONALD G.     CO HALEY, NAKORA AND PEREZ, P.A.     10     Street Address (P.O. Bor Number Is Not Acceptable)       FORT LAUDERDALE FL, 33301     44     City     FL     15     20     Code       Fursuant to the provisions of Sections 607 0502, and 607 1508, Floridal Statutes, the abover-named corporation submits this statement for the purpose of changing its registered     13     ADDITIONSICHARGES TO OFFICERS AND DIRECTORS IN 12       Fursuant to the provisions of Sections 607 0502, Pointal Statutes, the adverse of the oblations of Sections 607 0502, Pointal Statutes, the adverse of the oblations of Sections 607 0502, Pointal Statutes,	NRISE FL 33351			DO NOT WRITE IN TH	
Immound Prece of Business     Immound Precessor					•
Nuter, Apt. H. etc.   Suite, Apt. H. etc.   S. Confiduto of Status Desired   \$6.75 Additional     Site Apt. H. etc.   Zip   Clip & Status   \$. Confiduto of Status Desired   \$For Required     Site Apt. H. etc.   Zip   Clip & Status   \$. Edication Campaign Financing   \$St.00 May be Trust Fund Control yours the current year Integration     Site Apt. H. etc.   Zip   Country   8. This corporation oves the current year Integration   Added to Fees     Site Apt. H. etc.   Zip   Country   8. This corporation oves the current year Integration   Added to Fees     Site Apt. H. etc.   Zip   Country   8. This corporation oves the current year Integration   Added to Fees     Site Apt. H. etc.   Zip   Country   8. This corporation oves the current year Integration   Added to Fees     Site Apt. H. etc.   Zip   Country   8. This corporation oves the current year Integration   Added to Fees     Site Apt. H. etc.   Zip   Zip   Country   8. This corporation oves the current year Integration   Added to Fees     Field Annual App. In the Operation of Site Corporation oves the current year Integration of app. In the Operation of Corporation status the statument for the purpose of changing list registered   Site App. This corporation status the current year Integration<	Principal Place of Business	2a. Mailing Address			Applied For
inv d. State City & State For Required For Required   inv d. State City & State For Required For Required   ip Country Zp Country S. Conficet of Status Desired State   ip Country Zp Country 8. This corporation was the current year intergifie   is Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 10. Name and Address of New Registered Agent   ENCLERT, RONALD G. COUNTY Image: State Stat	Suite Act # otc			65-0166179	Not Applicable
City & State   City & State   City & State   Electric Charging Financing   \$5.00 key Ba     dp   Country   Zip   Country   8. This corporation oves the current year integrate   Added to Fees     gp   0. Mame and Address of Current Registered Agent   91   Name and Address of Euronal Property Tax.   Xes   No     eNGLERT, RONALD G.   20   Country   8. This corporation oves the current year integrate   Address of Euronal Property Tax.   Xes   No     ENGLERT, RONALD G.   20   Name and Address of Euronal Property Tax.   Xes   No   Xes   No     110 EAST BROWARD BLVD. SUITE 650   FORT LAUDERDALE FL 33301   91   Name   183   Address (P.O. Box Number is Not Acceptable)   191   Size of Address (P.O. Box Number is Not Acceptable)   191   Size of Address (P.O. Box Number is Not Acceptable)   191 <td< td=""><td>ouito, Apt. #, 510.</td><td></td><td></td><td>5. Certifcate of Status Desired</td><td></td></td<>	ouito, Apt. #, 510.			5. Certifcate of Status Desired	
Image: Second Sections Image: Second	City & State	City & State	-		\$5.00 May Be
Image: constraint of the provision of Section Registered Agent In mark and Address of New Registered Agent   9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent   ENCIDENT, RONALD G. C/O HALEY, SINAGRA AND PEREZ, P.A. 110 EAST BROWARD BLVD. SUTE 650 FORT LAUDERDALE FL 33301 11   FOR TLAUDERDALE FL 31 11   Streat Address (P.O. Box Number Is Not Acceptable) 11   Streat Address (P.O. Box Number Is Not Acceptable) 11   Streat Address (P.O. Box Number Is Not Acceptable) 12   Streat Address (P.O. Box Number Is Not Acceptable) 12   Streat Address (P.O. Box Number Is Not Acceptable) 12   Streat Address	Zip Country		Country	Trust Fund Contribution	
ENGLERT, RONALD G.   61   Name     C/O HALEY, SINAGRA AND PEREZ, P.A.   110 EAST BROWARD BLVD. SUITE 650     FORT LAUDERDALE FL 33301   64   City   FL   65     B3   64   City   FL   65   Zip Code     Pursuant to the provisions of Sections 60/ 0502 and 607.1508, Florida Statutes, the above-named corporation submits this statament for the purpose of changing its registered agent, a took, the Subte of hange was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, a took, the Subte of hange was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the object agent at the object or philosentane to or philosentane to or philosentane to registered agent as the integrating to a philosentane the integration's board of directors. I hereby accept the appointment as registered agent. I and main with, and accept the object or philosentane to registered agent and the integration's board of directors. I hereby accept the appointment as registered agent. I and accept the object agent and the integration's board of directors. I hereby accept the appointment as registered agent. I and accept the object agent and the integration's board of directors. I hereby accept the appointment as registered agent. The Electrons of the appointment as registered agent. I and the appointment as registered agent and the integration's board of directors. I hereby accept the appointment as registered agent. I and accept the object agent and the integration's board of directors. I hereby accept the appointment and appointment and appointment and appointment and appointment agent age	· · · · · ·	, <u> </u>			
ENGLEFIT, RONADD G.   Image: Cite Address (P.O. Box Number is Not Acceptable)     C/O HALEY, SINAGRA AND PEREZ, P.A.   Image: Cite Address (P.O. Box Number is Not Acceptable)     110 EAST BROWARD BLVD. SUITE 650   FG     FORT LAUDERDALE FL 33301   FL     FURMATION To the provisions of Sections 607 0502 and 607, 1508, Florida Statutes, the above-named corporation submits this statament for the puppes of changing lits registered agent, and maintain with, and accept the obligations of Section 607 0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and maintain with, and accept the obligations of Section 607 0505, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and maintain with, and acceptable)     OFFICERS AND DIRECTORS     13. ADDIFIONSICHANGES TO OFFICERS AND DIRECTORS IN 12     OFFICERS AND DIRECTORS     13. ADDIFIONSICHANGES TO OFFICERS AND DIRECTORS IN 12     OFFICERS AND DIRECTORS     13. ADDIFIONSICHANGES TO OFFICERS AND DIRECTORS IN 12     OFFICERS AND DIRECTORS     10 DELETE     11 The     COFFICERS AND DIRECTORS     ADDIFIONSICHANGES TO OFFICERS AND DIRECTORS IN 12     Conservations of polymetria and register addess     TOW	9. Name and Address of Cu	urrent Registered Agent	94 Name	10. Name and Address of New Registere	d Agent
Signature, typed or primed name of registrational (NOTE: Registered Agent acquired when relatation)   DATE     OFFICERS AND DIRECTORS   13.   ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12     FELDMAN, MARK   DELETE   1.1 TILE   Change   Additional context of the context	D		84 City		85 Zip Code
OFFICERS AND DIRECTORS   13.   ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12     D   DELETE   1.1 TITLE   Change   Additic     FELDMAN, MARK   1.2 NAME   1.2 NAME   Change   Additic     TADDRESS   7800 W OAKLAND PK BLVD   1.3 STREET ADDRESS   1.3 Change   Additic     TADDRESS   SUNRISE FL   1.4 CITV-ST-2/P   Change   Additic     D   DELETE   2.1 TITLE   Change   Additic     ROUS, STANLEY   2.2 NAME   2.3 STREET ADDRESS   Additic     ST-2P   SUNRISE FL   2.4 CITV-ST-2/P   Change   - Change   - Change   - Additic     GRODIN, RICHARD   2.2 NAME   3.2 STREET ADDRESS   3.2 NAME   3.2 STREET ADDRESS   - Change   - Ch	office or registered agent, or both, in the S	state of Florida. Such change was a	uthorized by the corporat	poration submits this statement for the purpose	of changing its registered
FELDMAN, MARK   12 NAME     TADDRESS   7800 W OAKLAND PK BLVD     ST.2P   SUNRISE FL     D   DELETE     Z1 TILE   Change     ROUS, STANLEY   21 TITLE     ROUS, STANLEY   23 STREET ADDRESS     7800 W OAKLAND PK BLVD   23 STREET ADDRESS     ST.2P   SUNRISE FL     Q   DELETE     ST.2P   SUNRISE FL     Q   DELETE     ST.2P   SUNRISE FL     Q   DELETE     ST.2P   JURRISE FL     Q   DELETE     ST.2P   JURRISE FL     Q   DELETE     SUNRISE FL   24 GTY-ST-2P     D   DELETE     J1:2P   JURRISE FL     Q   DELETE     BZER, WAYNE   42 GTY-ST-2P     D   DELETE     BZER, WAYNE   42 GTY-ST-2P     D   DELETE     SUNRISE FL   34 GTY-ST-2P     D   DELETE     SUNRISE FL   42 GTY-ST-2P     D   DELETE     STANLEY, HAROLD	office or registered agent, or both, in the S agent. I am familiar with, and accept the of NATURE	State of Florida. Such change was a bligations of, Section 607.0505, Flo	uthorized by the corporat rida Statutes.	poration submits this statement for the purpose ion's board of directors. I hereby accept the app	of changing its registered
TADDRESS   7800 W OAKLAND PK BLVD   13 STREET ADDRESS     ST-ZP   SUNRISE FL   14 CITY-ST-ZP     D   DELETE   21 TITLE     ROUS, STANLEY   23 STREET ADDRESS     SUNRISE FL   23 STREET ADDRESS     SUNRISE FL   24 CITY-ST-ZP     D   DELETE     SUNRISE FL   4 CITY-ST-ZP     D   DELETE     BIZER, WAYNE   4 2 NAME     BIZER, WAYNE   4 2 NAME     BIZER, WAYNE   4 2 STREET ADDRESS     S1T-ZP   Change     DS   DELETE     ST-ZP   Change     DS   DELETE     ST-ZP   Change     DS   DELETE     STANLEY, HAROLD   53 STREET ADDRESS     T-2P   PANTATION FL     STANLEY, HAROLD   53 STR	office or registered agent, or both, in the S agent. I am familiar with, and accept the of NATURE Signature, typed or printed name of registere OFFICERS	State of Florida. Such change was a bligations of, Section 607.0505, Flo d agent and title if applicable. (NOTE S AND DIRECTORS	uthorized by the corporat rida Statutes. Registered Agent signature requir 13.	poration submits this statement for the purpose ion's board of directors. I hereby accept the app ed when reinstating) DATE	of changing its registered ointment as registered
D   DELETE   2.1 TITLE   Change   Additio     ROUS, STANLEY   22 NAME   23 STREET ADDRESS   23 STREET ADDRESS     7800 W OAKLAND PK BLVD   23 STREET ADDRESS   24 CITY-ST-2P	office or registered agent, or both, in the S agent. I am familiar with, and accept the of NATURE Signature, typed or printed name of registere OFFICERS	State of Florida. Such change was a bligations of, Section 607.0505, Flo d agent and title if applicable. (NOTE S AND DIRECTORS	Withorized by the corporate       rida Statutes.       Registered Agent signature require       13.       1.1 TITLE	poration submits this statement for the purpose ion's board of directors. I hereby accept the app ed when reinstating) DATE	of changing its registered ointment as registered
ROUS, STANLEY   22 NAME     TADDRESS   7800 W OAKLAND PK BLVD     ST-ZP   SUNRISE FL     D   DELETE     STORE   24 CITY-ST-ZP     D   DELETE     STORE   24 CITY-ST-ZP     ChangeC	office or registered agent, or both, in the S agent. I am familiar with, and accept the of NATURE Signature, typed or printed name of registere OFFICERS D FELDMAN, MARK 7800 W OAKLAND PK BLV	tate of Florida. Such change was a bligations of, Section 607.0505, Flo d agent and title if applicable. (NOTE S AND DIRECTORS	Interpretation     Registered Agent signature require     13.     1.1 TITLE     1.2 NAME	poration submits this statement for the purpose ion's board of directors. I hereby accept the app ed when reinstating) DATE	of changing its registered ointment as registered
TADRESS   7800 W OAKLAND PK BLVD   2.3 STREET ADDRESS     ST-ZIP   D   DELETE   3.1 ITLE     D   DELETE   3.1 ITLE     GRODIN, RICHARD   3.2 NME     TADDRESS   7800 W OAKLAND PK BLVD   3.3 STREET ADDRESS     72 P   SUNRISE FL   3.4 CITY-ST-ZIP     D   DELETE   4.1 ITTLE     D   DELETE   4.1 ITTLE     BIZER, WAYNE   4.2 NAME     SUNRISE FL   0.4 CITY-ST-ZIP     D   DELETE     BIZER, WAYNE   4.2 NAME     StanLEY, HAROLD   4.3 STREET ADDRESS     T-ZP   SUNRISE FL     DS   DELETE     STANLEY, HAROLD   5.2 NAME     STANLEY, HAROLD   5.3 STREET ADDRESS     T-ZP   PLANTATION FL     PD   DELETE     GREENBERG, MARVIN   6.2 NAME     GREENBERG, MARVIN   6.3 STREET ADDRESS     T-ZP   TAMARAC FL     PD   DELETE     GREENBERG, MARVIN   6.3 STREET ADDRESS     T-ZP   TAMARAC FL     MARAAC FL   6.3 STREET ADDRESS	office or registered agent, or both, in the S agent. I am familiar with, and accept the of NATURE Signature, typed or printed name of registere OFFICERS D FELDMAN, MARK 7800 W OAKLAND PK BLV	tate of Florida. Such change was a bligations of, Section 607.0505, Flo d agent and litle if applicable. (NOTE S AND DIRECTORS	Interpretation     Registered Agent signature require     13.     1.1 TITLE     1.2 NAME     1.3 STREET ADDRESS     1.4 CITY-ST-ZIP	poration submits this statement for the purpose ion's board of directors. I hereby accept the app ed when reinstating) DATE	AND DIRECTORS IN 12
D   DELETE   31 TITLE     GRODIN, RICHARD   32 NAME     TADDRESS   7800 W OAKLAND PK BLVD     SUNRISE FL   34 CITY-ST-ZIP     D   DELETE     BIZER, WAYNE   4.1 TITLE     BIZER, WAYNE   4.2 NAME     SUNRISE FL   DELETE     D   DELETE     BIZER, WAYNE   4.2 NAME     SUNRISE FL   Change     DS   DELETE     STADES   51 TITLE     STAPE   10 DELETE     STANLEY, HAROLD   43 STREET ADDRESS     TADDRESS   177.6 PINE ISLAND RD.     STANLEY, HAROLD   52 NAME     STAPE   53 STREET ADDRESS     TADDRESS   1776 PINE ISLAND RD.     STAPE   54 CITY-ST-ZIP     PD   DELETE     GREENBERG, MARVIN   54 CITY-ST-ZIP     TADDRESS   5710 NW 71ST CT.     GREENBERG, MARVIN   62 NAME     GREENBERG, MARVIN   62 NAME     GREENBERG, MARVIN   63 STREET ADDRESS     T-ZIP   TADDRESS     TADDRESS   51 TITLE     GREENBERG,	office or registered agent, or both, in the S agent. I am familiar with, and accept the of NATURE Signature, typed or printed name of registere OFFICERS D FELDMAN, MARK 7800 W OAKLAND PK BLVI ST-ZIP D	tate of Florida. Such change was a bligations of, Section 607.0505, Flo d agent and litle if applicable. (NOTE S AND DIRECTORS	uthorized by the corporatividal Statutes.     Registered Agent signature requirements     13.     1.1 TITLE     1.2 NAME     1.3 STREET ADDRESS     1.4 CITY-ST-ZIP     2.1 TITLE	poration submits this statement for the purpose ion's board of directors. I hereby accept the app ed when reinstating) DATE	AND DIRECTORS IN 12
GRODIN, RICHARD   32 NAME     TADDRESS   7800 W OAKLAND PK BLVD     SUNRISE FL   34 CITY-ST-ZIP     D   DELETE     BIZER, WAYNE   4. CITY-ST-ZIP     Change   Additio     BIZER, WAYNE   4. CITY-ST-ZIP     D   DELETE     BIZER, WAYNE   4. CITY-ST-ZIP     Change   Additio     ST-ZIP   SUNRISE FL     DS   DELETE     STANLEY, HAROLD   51 TITLE     STANLEY, HAROLD   52 NAME     TADDRESS   TADDRESS     TADDRESS   DELETE     STANLEY, HAROLD   53 STREET ADDRESS     TADDRESS   TADRESS     TADDRESS   TADRESS     TADDRESS   TADRESS     TADDRESS   TADRESS     TADDRESS   TADRESS     TADRESS   STREET ADDRESS     T.ZIP   PLANTATION FL     PD   DELETE     GREENBERG, MARVIN   62 NAME     GREENBERG, MARVIN   62 NAME     T.ZIP   TAMARAC FL     Horeby certify that the information supplied with this filing does not qualif	office or registered agent, or both, in the S agent. I am familiar with, and accept the of NATURE Signature, typed or printed name of registere OFFICERS D FELDMAN, MARK 7800 W OAKLAND PK BLVI SUNRISE FL D ROUS, STANLEY 7800 W OAKLAND PK BLVI	tate of Florida. Such change was a bligations of, Section 607.0505, Flo	Item Statutes St	poration submits this statement for the purpose ion's board of directors. I hereby accept the app ed when reinstating) DATE	AND DIRECTORS IN 12
ST.ZIP   SUNRISE FL   34. CITY-ST-ZIP     D   DELETE   4.1 TITLE   Change   Addition     BIZER, WAYNE   4.2 NAME   4.2 NAME   Addition     TADDRESS   8411 W OAKLAND PK BLVD   4.3 STREET ADDRESS   4.4 CITY-ST-ZIP     DS   DELETE   5.1 TITLE   Change   Addition     STANLEY, HAROLD   DELETE   5.1 TITLE   Change   Addition     T ADDRESS   TADRESS   1776 PINE ISLAND RD.   5.3 STREET ADDRESS   Change   Addition     T ADDRESS   1776 PINE ISLAND RD.   5.3 STREET ADDRESS   Change   Addition     T-ZIP   PLANTATION FL   54 CITY-ST-ZIP   Change   Addition     TADRESS   1776 PINE ISLAND RD.   5.3 STREET ADDRESS   Change   Addition     T-ZIP   PD   DELETE   6.1 TITLE   Change   Addition     GREENBERG, MARVIN   62 NAME   62 NAME   Change   Addition     T ADDRESS   7710 NW 71ST CT.   63 STREET ADDRESS   Change   Addition     T-ZIP   TAMARAC FL   64 CITY-ST-ZIP   FL   FL   Addition <t< td=""><td>office or registered agent, or both, in the S agent. I am familiar with, and accept the of NATURE Signature, typed or printed name of registere OFFICERS TELDMAN, MARK 7800 W OAKLAND PK BLVI SUNRISE FL D ROUS, STANLEY 7800 W OAKLAND PK BLVI ST-ZIP SUNRISE FL</td><td>tate of Florida. Such change was a biligations of, Section 607.0505, Flo</td><td>uthorized by the corporativida Statutes.     Registered Agent signature required     13.     1.1 TITLE     1.2 NAME     1.3 STREET ADDRESS     1.4 CITY-ST-ZIP     2.1 TITLE     2.2 NAME     2.3 STREET ADDRESS     2.4 CITY-ST-ZIP     2.4 CITY-ST-ZIP</td><td>poration submits this statement for the purpose ion's board of directors. I hereby accept the app ed when reinstating) DATE</td><td>AND DIRECTORS IN 12</td></t<>	office or registered agent, or both, in the S agent. I am familiar with, and accept the of NATURE Signature, typed or printed name of registere OFFICERS TELDMAN, MARK 7800 W OAKLAND PK BLVI SUNRISE FL D ROUS, STANLEY 7800 W OAKLAND PK BLVI ST-ZIP SUNRISE FL	tate of Florida. Such change was a biligations of, Section 607.0505, Flo	uthorized by the corporativida Statutes.     Registered Agent signature required     13.     1.1 TITLE     1.2 NAME     1.3 STREET ADDRESS     1.4 CITY-ST-ZIP     2.1 TITLE     2.2 NAME     2.3 STREET ADDRESS     2.4 CITY-ST-ZIP     2.4 CITY-ST-ZIP	poration submits this statement for the purpose ion's board of directors. I hereby accept the app ed when reinstating) DATE	AND DIRECTORS IN 12
D   DELETE   4.1 TITLE   Change   Additio     BIZER, WAYNE   4.2 NAME   4.2 NAME   Additio     StT_ZIP   SUNRISE FL   4.3 STREET ADDRESS   4.4 CITY-ST-ZIP     DS   DELETE   5.1 TITLE   Change   Additio     STANLEY, HAROLD   DELETE   5.1 TITLE   Change   Additio     T ADDRESS   TADRESS   1776 PINE ISLAND RD.   5.3 STREET ADDRESS   Change   Additio     T ADDRESS   1776 PINE ISLAND RD.   5.3 STREET ADDRESS   5.4 CITY-ST-ZIP   Change   Additio     T ADDRESS   7776 PINE ISLAND RD.   5.3 STREET ADDRESS   5.4 CITY-ST-ZIP   Change   Additio     T ADDRESS   7710 NW 71ST CT.   5.4 CITY-ST-ZIP   Change   Additio     T ADDRESS   7710 NW 71ST CT.   6.3 STREET ADDRESS   Change   Additio     T-ZIP   TAMARAC FL   6.4 CITY-ST-ZIP   Forder Statutes. 1 further certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. 1 further certify that the information ndicated 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 coath; that 1 am an officer or dingere proversed to everse	office or registered agent, or both, in the S agent. I am familiar with, and accept the of NATURE Signature, typed or printed name of registere OFFICERS D FELDMAN, MARK 7800 W OAKLAND PK BLVI SUNRISE FL D ROUS, STANLEY 7800 W OAKLAND PK BLVI SUNRISE FL D SUNRISE FL D D	tate of Florida. Such change was a biligations of, Section 607.0505, Flo	uthorized by the corporativida Statutes.     Registered Agent signature required     13.     1.1 TITLE     1.2 NAME     1.3 STREET ADDRESS     1.4 CITY-ST-ZIP     2.1 TITLE     2.2 NAME     2.3 STREET ADDRESS     2.4 CITY-ST-ZIP     3.1 TITLE	poration submits this statement for the purpose ion's board of directors. I hereby accept the app ed when reinstating) DATE	AND DIRECTORS IN 12
BIZER, WAYNE   4.2 NAME     ADDRESS   8411 W OAKLAND PK BLVD     SUNRISE FL   4.4 CITY-ST-ZIP     DS   DELETE     STANLEY, HAROLD   5.1 TITLE     TADDRESS   DELETE     STANLEY, HAROLD   5.2 NAME     TADDRESS   TADDRESS     TADDRESS   DELETE     STANLEY, HAROLD   5.2 NAME     TADDRESS   1776 PINE ISLAND RD.     TADDRESS   5.3 STREET ADDRESS     T-ZIP   PLANTATION FL     PD   DELETE     GREENBERG, MARVIN   6.1 TITLE     TADDRESS   7710 NW 71ST CT.     TADDRESS   6.4 CITY-ST-ZIP     hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information noticated on this annual report or supplemental annual report or supplemental annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under own; that I am an inflicer or director of the corporation or the receiver on the suppower do to evecute this report as required by Charter 6.27. Elevide Statutes and the own; that I am an inflicer or director of the corporation or the receiver on the suppower do to evecute the same legal effect as if made under own; that I am an in the otherecorporatin on the corporation or the receiver on the s	office or registered agent, or both, in the S agent. I am familiar with, and accept the of NATURE Signature, typed or printed name of registere OFFICERS D FELDMAN, MARK 7800 W OAKLAND PK BLVI SUNRISE FL D ROUS, STANLEY 7800 W OAKLAND PK BLVI SUNRISE FL D GRODIN, RICHARD 7800 W OAKLAND PK BLVI	tate of Florida. Such change was a biligations of, Section 607.0505, Flo	uthorized by the corporativida Statutes.     Registered Agent signature required     13.     1.1 TITLE     1.2 NAME     1.3 STREET ADDRESS     1.4 CITY-ST-ZIP     2.1 TITLE     2.2 NAME     2.3 STREET ADDRESS     2.4 CITY-ST-ZIP     3.1 TITLE     3.2 NAME	poration submits this statement for the purpose ion's board of directors. I hereby accept the app ed when reinstating) DATE	AND DIRECTORS IN 12
SUNRISE FL   44 CITY-ST-ZIP     DS   DELETE     STANLEY, HAROLD   52 NAME     T ADDRESS   1776 PINE ISLAND RD.     T-ZIP   PLANTATION FL     PD   DELETE     GREENBERG, MARVIN   64 CITY-ST-ZIP     T ADDRESS   7710 NW 71ST CT.     GREENBERG, MARVIN   63 STREET ADDRESS     T-ZIP   FAMARAC FL     hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information noticated 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 influence 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 influence or the convorting on the receiver or the server of the convorting on the receiver or the server of the server of the server of the convorting on the server of	office or registered agent, or both, in the S agent. I am familiar with, and accept the of NATURE Signature, typed or printed name of registere OFFICERS D FELDMAN, MARK TADDRESS 7800 W OAKLAND PK BLVI SUNRISE FL D ROUS, STANLEY 7800 W OAKLAND PK BLVI SUNRISE FL D GRODIN, RICHARD TADDRESS ST-ZIP SUNRISE FL	tate of Florida. Such change was a biligations of, Section 607.0505, Flo	uthorized by the corporativida Statutes.     Registered Agent signature requir     13.     1.1 TITLE     1.2 NAME     1.3 STREET ADDRESS     1.4 CITY-ST-ZIP     2.1 TITLE     2.2 NAME     2.3 STREET ADDRESS     2.4 CITY-ST-ZIP     3.1 TITLE     3.2 NAME     3.3 STREET ADDRESS     3.4 CITY-ST-ZIP     3.4 CITY-ST-ZIP	poration submits this statement for the purpose ion's board of directors. I hereby accept the app ed when reinstating) DATE	of changing its registered ointment as registered
DS   DELETE   5.1 TITLE   Change   Addition     T ADDRESS   STANLEY, HAROLD   52 NAME   53 STREET ADDRESS   54 CITY-ST-ZIP     PLANTATION FL   64 CITY-ST-ZIP   Change   Addition     PD   DELETE   6.1 TITLE   Change   Addition     T ADDRESS   7710 NW 71ST CT.   6.3 STREET ADDRESS   Change   Addition     T ADDRESS   7710 NW 71ST CT.   6.3 STREET ADDRESS   6.4 CITY-ST-ZIP     hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information nucleated 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 indicated on the corporation on the receiver on the receiver on the second this report as required by Change FOT.   Flore on this 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 indicated on this annual report or supplemental annual report or there empowered to execute this report as required by Change FOT.	office or registered agent, or both, in the S agent. I am familiar with, and accept the of NATURE Signature, typed or printed name of registere OFFICERS D FELDMAN, MARK TADDRESS TADDRESS SUNRISE FL D ROUS, STANLEY 7800 W OAKLAND PK BLVI SUNRISE FL D GRODIN, RICHARD SUNRISE FL D GRODIN, RICHARD SUNRISE FL D GRODIN, RICHARD SUNRISE FL D GRODIN, RICHARD SUNRISE FL D GRODIN, RICHARD SUNRISE FL D D	tate of Florida. Such change was a biligations of, Section 607.0505, Flo	uthorized by the corporativida Statutes.     Registered Agent signature requir     13.     1.1 TITLE     1.2 NAME     1.3 STREET ADDRESS     1.4 CITY-ST-ZIP     2.1 TITLE     2.2 NAME     2.3 STREET ADDRESS     2.4 CITY-ST-ZIP     3.1 TITLE     3.2 NAME     3.3 STREET ADDRESS     3.4 CITY-ST-ZIP     4.1 TITLE     4.1 TITLE	poration submits this statement for the purpose ion's board of directors. I hereby accept the app ed when reinstating) DATE	of changing its registered ointment as registered
STANLEY, HAROLD   52 NAME     TADDRESS   1776 PINE ISLAND RD.     1776 PINE ISLAND RD.   53 STREET ADDRESS     PLANTATION FL   64 CITY-ST-ZIP     PD   DELETE     GREENBERG, MARVIN   62 NAME     7710 NW 71ST CT.   63 STREET ADDRESS     T-ZIP   TAMARAC FL     hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information noticated 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 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 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 indicated on this annual report or supplemental 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 indicated on this annual report or supplemental annual report or supplemental 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 indicated on this annual report or supplemental annual re	office or registered agent, or both, in the S agent. I am familiar with, and accept the of NATURE Signature, typed or printed name of registere OFFICERS 7800 W OAKLAND PK BLVI ST. ZIP SUNRISE FL D ROUS, STANLEY 7800 W OAKLAND PK BLVI SUNRISE FL D GRODIN, RICHARD 7800 W OAKLAND PK BLVI SUNRISE FL D GRODIN, RICHARD 7800 W OAKLAND PK BLVI SUNRISE FL D BIZER, WAYNE 8411 W OAKLAND PK BLVI	tate of Florida. Such change was a biligations of, Section 607.0505, Flo	uthorized by the corporatividal Statutes.     Registered Agent signature required     13.     1.1 TITLE     1.2 NAME     1.3 STREET ADDRESS     1.4 CITY-ST-ZIP     2.1 TITLE     2.2 NAME     2.3 STREET ADDRESS     2.4 CITY-ST-ZIP     3.1 TITLE     3.2 NAME     3.3 STREET ADDRESS     3.4 CITY-ST-ZIP     4.1 TITLE     4.2 NAME     4.2 NAME	poration submits this statement for the purpose ion's board of directors. I hereby accept the app ed when reinstating) DATE	of changing its registered ointment as registered
PLANTATION FL   54 CITY-ST-ZIP     PD   DELETE   6.1 TITLE   Change   Addition     GREENBERG, MARVIN   6.2 NAME   6.2 NAME   Change   Addition     T ADDRESS   7710 NW 71ST CT.   6.3 STREET ADDRESS   6.4 CITY-ST-ZIP   6.4 CITY-ST-ZIP     hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information ndicated 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 indicated on the corporation or the receiver or timefee empowered to execute this report as required by Chapter 607. Elocida Statutes, and the my party carding and the my party car	office or registered agent, or both, in the S agent. I am familiar with, and accept the of NATURE Signature, typed or printed name of registere OFFICERS D FELDMAN, MARK TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS SUNRISE FL D GRODIN, RICHARD TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS TADDRESS	tate of Florida. Such change was a biligations of, Section 607.0505, Flo	uthorized by the corporativida Statutes.     Registered Agent signature requir     13.     1.1 TITLE     1.2 NAME     1.3 STREET ADDRESS     1.4 CITY-ST-ZIP     2.1 TITLE     2.2 NAME     2.3 STREET ADDRESS     2.4 CITY-ST-ZIP     3.1 TITLE     3.2 NAME     3.3 STREET ADDRESS     3.4 CITY-ST-ZIP     4.1 TITLE     4.2 NAME     4.3 STREET ADDRESS     3.4 CITY-ST-ZIP     4.1 TITLE     4.3 STREET ADDRESS     4.4 CITY-ST-ZIP	poration submits this statement for the purpose ion's board of directors. I hereby accept the app ed when reinstating) DATE	of changing its registered ointment as registered
PD Change DELETE 6.1 TITLE Change Addition GREENBERG, MARVIN 62 NAME T ADDRESS 7710 NW 71ST CT. 6.3 STREET ADDRESS T-ZIP TAMARAC FL 6.4 CITY-ST-ZIP hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 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 indicated on this report are receiver on therefore empowered to execute this report as required by Chapter 607. Florida Statutes, and there my parts in the same legal effect as if made under oath; that I am an in the composition of the receiver on therefore empowered to execute this report as required by Chapter 607.	office or registered agent, or both, in the S agent. I am familiar with, and accept the of NATURE Signature, typed or printed name of registere OFFICERS D FELDMAN, MARK TADDRESS 7800 W OAKLAND PK BLVI SUNRISE FL D ROUS, STANLEY 7800 W OAKLAND PK BLVI SUNRISE FL D GRODIN, RICHARD 7800 W OAKLAND PK BLVI SUNRISE FL D BIZER, WAYNE 8411 W OAKLAND PK BLVI ST-ZIP D BIZER, WAYNE 8411 W OAKLAND PK BLVI SUNRISE FL D BIZER, WAYNE 8411 W OAKLAND PK BLVI SUNRISE FL D STANLEY, HAROLD	tate of Florida. Such change was a biligations of, Section 607.0505, Flo	uthorized by the corporativida Statutes.     Registered Agent signature requit     13.     1.1 TITLE     1.2 NAME     1.3 STREET ADDRESS     1.4 CITY-ST-ZIP     2.1 TITLE     2.2 NAME     2.3 STREET ADDRESS     2.4 CITY-ST-ZIP     3.1 TITLE     3.2 NAME     3.3 STREET ADDRESS     3.4 CITY-ST-ZIP     4.1 TITLE     4.2 NAME     4.3 STREET ADDRESS     3.4 CITY-ST-ZIP     4.1 TITLE     4.2 NAME     4.3 STREET ADDRESS     4.4 CITY-ST-ZIP     5.1 TITLE	poration submits this statement for the purpose ion's board of directors. I hereby accept the app ed when reinstating) DATE	of changing its registered ointment as registered
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T-ZP TAMARAC FL 64 CITY-ST-ZIP hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information ndicated 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 thefee empowered to execute this report as required by Chapter 602. Florida Statutes, and ther my some concerning	office or registered agent, or both, in the S agent. I am familiar with, and accept the of NATURE Signature, typed or printed name of registere OFFICERS D FELDMAN, MARK 7800 W OAKLAND PK BLVI SUNRISE FL D ROUS, STANLEY 7800 W OAKLAND PK BLVI SUNRISE FL D GRODIN, RICHARD 7800 W OAKLAND PK BLVI SUNRISE FL D GRODIN, RICHARD 7800 W OAKLAND PK BLVI SUNRISE FL D BIZER, WAYNE 8411 W OAKLAND PK BLVI SUNRISE FL D BIZER, WAYNE 8411 W OAKLAND PK BLVI SUNRISE FL D STANLEY, HAROLD 1776 PINE ISLAND RD. PLANTATION FL	tate of Florida. Such change was a biligations of, Section 607.0505, Flo	uthorized by the corporativida Statutes.     Registered Agent signature requit     13.     1.1 TITLE     1.2 NAME     1.3 STREET ADDRESS     1.4 CITY-ST-ZIP     2.1 TITLE     2.2 NAME     2.3 STREET ADDRESS     2.4 CITY-ST-ZIP     3.1 TITLE     3.2 NAME     3.3 STREET ADDRESS     3.4 CITY-ST-ZIP     4.1 TITLE     4.2 NAME     4.3 STREET ADDRESS     3.4 CITY-ST-ZIP     4.1 TITLE     4.2 NAME     4.3 STREET ADDRESS     4.4 CITY-ST-ZIP     5.1 TITLE     5.2 NAME     5.3 STREET ADDRESS     5.4 CITY-ST-ZIP	poration submits this statement for the purpose ion's board of directors. I hereby accept the app ed when reinstating) DATE	Change Addition Change Addition Change Addition Change Addition Change Addition
hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information ndicated 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 fifteer or director of the corporation or the receiver or fundee empowered to execute this report as required by Chapter 607. Florida Statutes; and the my some concerning the corporation or the receiver or time empowered to execute this report as required by Chapter 607. Florida Statutes; and the my some concerning the corporation or the receiver or time empowered to execute this report as required by Chapter 607.	office or registered agent, or both, in the S agent. I am familiar with, and accept the of NATURE Signature, typed or printed name of registere OFFICERS D FELDMAN, MARK 7800 W OAKLAND PK BLVI SUNRISE FL D ROUS, STANLEY 7800 W OAKLAND PK BLVI SUNRISE FL D GRODIN, RICHARD 7800 W OAKLAND PK BLVI SUNRISE FL D BIZER, WAYNE 8411 W OAKLAND PK BLVI SUNRISE FL D BIZER, WAYNE 8411 W OAKLAND PK BLVI SUNRISE FL D SUNRISE FL D ST-ZIP SUNRISE FL D STANLEY, HAROLD 1776 PINE ISLAND RD. PLANTATION FL PD GREENBERG, MARVIN	tate of Florida. Such change was a biligations of, Section 607.0505, Flo	uthorized by the corporativida Statutes.     Registered Agent signature requir     13.     1.1 TITLE     1.2 NAME     1.3 STREET ADDRESS     1.4 CITY-ST-ZIP     2.1 TITLE     2.2 NAME     2.3 STREET ADDRESS     2.4 CITY-ST-ZIP     3.1 TITLE     3.2 NAME     3.3 STREET ADDRESS     3.4 CITY-ST-ZIP     4.1 TITLE     4.2 NAME     4.3 STREET ADDRESS     4.4 CITY-ST-ZIP     5.1 TITLE     5.2 NAME     5.3 STREET ADDRESS     5.4 CITY-ST-ZIP     5.1 TITLE     5.3 STREET ADDRESS     5.4 CITY-ST-ZIP     6.1 TITLE     6.1 TITLE	poration submits this statement for the purpose ion's board of directors. I hereby accept the app ed when reinstating) DATE	Change Addition Change Addition Change Addition Change Addition Change Addition
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Block 12 or Block 13 if changed, or on an attachment with an address, with an other like empowered.	office or registered agent, or both, in the S agent. I am familiar with, and accept the of NATURE Signature, typed or printed name of registere OFFICERS D FELDMAN, MARK ET ADDRESS 7800 W OAKLAND PK BLVI SUNRISE FL D ROUS, STANLEY 7800 W OAKLAND PK BLVI SUNRISE FL D GRODIN, RICHARD SUNRISE FL D BIZER, WAYNE 8411 W OAKLAND PK BLVI SUNRISE FL D BIZER, WAYNE 8411 W OAKLAND PK BLVI SUNRISE FL D BIZER, WAYNE 8411 W OAKLAND PK BLVI ST-ZIP D STANLEY, HAROLD 1776 PINE ISLAND RD. PLANTATION FL PD GREENBERG, MARVIN ST-ZIP TADDRESS ST-ZIP C C C C C C C C C C C C C C C C C C C	tate of Florida. Such change was a biligations of, Section 607.0505, Flo	uthorized by the corporativida Statutes.     Registered Agent signature requit     13.     1.1 TITLE     1.2 NAME     1.3 STREET ADDRESS     1.4 CITY-ST-ZIP     2.1 TITLE     2.2 NAME     2.3 STREET ADDRESS     2.4 CITY-ST-ZIP     3.1 TITLE     3.2 NAME     3.3 STREET ADDRESS     3.4 CITY-ST-ZIP     4.1 TITLE     4.2 NAME     4.3 STREET ADDRESS     3.4 CITY-ST-ZIP     4.1 TITLE     4.2 NAME     4.3 STREET ADDRESS     4.4 CITY-ST-ZIP     5.1 TITLE     5.2 NAME     5.3 STREET ADDRESS     5.4 CITY-ST-ZIP     6.1 TITLE     6.2 NAME     6.3 STREET ADDRESS     5.4 CITY-ST-ZIP     6.1 TITLE     6.2 NAME     6.3 STREET ADDRESS     6.4 CITY-ST-ZIP     6.1 TITLE     6.2 NAME     6.3 STREET ADDRESS     6.4 CITY-ST-ZIP     7.1 TILE     7.1 TILE     7.1 TILE	poration submits this statement for the purpose ion's board of directors. I hereby accept the app ed when reinstating) DATE ADDITIONS/CHANGES TO OFFICERS /	Or changing its registered ointment as registered Ontropy INECTORS IN 12 Ohange Addition