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

**PROFIT CORPORATION** 



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

		1996	JHT			Secretary of State DIVISION OF CORPORATIONS				NS					
	OCUN Corporation		#	K6342	5	(8)									
EXPERT SERVICE CONTRACTORS, INC.															
						<b>  1   1   1   1   1   1   1   1   1</b>			AND BURN REGULATE						
_	de ale al EN	-6601	<u></u>		4										
						ailing Address									
7857 W. SAMPLE ROAD STE. 156					7857 W SAMPLE RD #156										
		RINGS FL 330	65			CORAL SPRINGS FL 33065				2	, Date Incorporated or Qualified	3a. Date	of Lact	Papart	
	US					US					"	01/30/1989		4/27/	•
						a. Mailing Address			*******	4	, FEI Number		<del></del>	Applied For	
21												65-0093118			Not Applicable
22	Suite, Apt. # 	t eic.	27	Suite, Apt. #, etc.					5	, Certificate of Status Desired			5 Additional Required		
ſ	City & State		**			City & State					6	. Election Campaign Financing	<del></del>		00 May Be
23	<u> </u>				28	<u> </u>						Trust Fund Contribution			led to Fees
<u> </u>	Zip 1	Country		untry	1	·-ıı			Country			. This corporation has liability for i		under	s 199.032,
24			25 and Ad	Idress of Current	29 Regis	stered Agent	30	I				Florida Statutes Yes  Name and Address of New R		cont	
		<b>9.</b>				TOTAL PAGE IN			81	Name		, Hame and Address of New H	ogisterou A	Agur	
PRIMATO, ROBERT						82 Street Addi				Ctroot Add	/E	O. Box Number is Not Acceptab	(a)		
7680 WESTWOOD DR #804						[32]				Sireer Add	1622 V	.c. box number is not neceptab			
	TAMAR	AC FL 333	FL 33321						83						
										City				85 2	Zip Code
1	1. Pursuant to	the provision	ons of S	ections 607.0502 a	and 60	07.1508. Florida Statute	s. th	e abov	L	amed corpo	ration	submits this statement for the nur	FL nose of char	naina its	registered office
	or registere familiar with	to the provisions of Sections 607.0532 and 60 ed agent, or both, in the State of Florida. Such th, and accept the obligations of, Section 637.				i change was authorized by the 0505, Florida Statutes.			orpo	oration's boa	ird of c	directors. I hereby accept the appoint	pintment as r	egistere	d agent. I am
s	IGNATURE														
Signature, typed or printed name of registered agent and the fi									Agent	signature requir	o when		DATE		
	<b>c.</b> ILF	DP		OFFICERS AND	FICERS AND DIRECTORS 13.				T		ADDITIONS/CHANGES TO OFFI		DIRECT:		
N/	AME	PRIMA	TO, R	OBERT		<b>1</b>		1.2 NAI					لسبا	21101190	
SŦ	REET ADORESS			GRASS DR				1.3 STF	1.3 STREET ADDRESS						
CI	TY-ST-ZIP	BOCA	RATO	N FL				1.4 CIT	Y-\$1	· ZIP					
	TLE					☐ DELETE	1	2 1 111	l f					Change	Addition
!	MF							2 2 NAI							
l	REET ADDRESS TY-ST-ZIP									ADORESS 71P					
	TLE								2 4 CITY - ST - ZIP 3. 1 TITLE					Change	Addition
N/	AME						ı	3.2 NAI	VE					•	
SI	REET ADORESS						ı	3.3 STI	REET.	ADDRESS					
·	1Y - S1 - ZIP							3.4 CIT	******	- ZIP					
	TITLE NAME					☐ DELETE 4.11								Change	Addition
l	REET ADDRESS						ı	4.2 NAN		ADDRESS					
l	TY-ST-ZIP						ı	4.3 STP							
	TLE			**********		DELFIE	1	5 1 111						Change	Addition
N <sup>a</sup>	ME							5.2 NAM	ΜE						
ST	REET ADDRESS							5 3 S1H	EET #	AODRESS					Ì
	TY-ST-ZIP					DELETE		5.4 CIT		-7IP				Ob	Fig. 42000
	TLE NME					DELETE	ı	6 1 TIT 62 NAM						Change	Addition
								0.4 (3.4)	100						ı

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 an attachment with an address.

6.3 STREET ADDRESS 6.4 CITY-ST-Z-P

SIGNATURE:

STREET ADDRESS

Robert Ainsto 4/34/96 954.345-7098