CORI ANNU	POFIT PORATION AL REPORT		Sandra I Socreta	RTMENT OF STATE <b>B. Mortham</b> ary of State CORPORATIONS	Mar 16 1 Secreta			
	AENT #	K63927	(3)		T I DOLLAND AND OMBO MAND AND ODDA A	<b>n</b> ik olohi didil digil		
incipal Place 2997 APALAC FALLAHASSEE	HEE PARKWAY	2	iling Address 997 APALACHEE PARI ALLAHASSEE FL 3230		DO NOT WRITE IN THIS SPACE			
					3. Date Incorporated or Qualified 02/07/1989			
Principal Pla	ace of Business	28.	Mailing Address		4. FEI Number 59-2932214			plied For t Applicable
Suite, Apl.	, olc.		Suite, Apt. #, etc.	· · · · · · · · · · · · · · · · · · ·	5. Certificate of Status Desired	□ \$	8.75 A	dditional
City & State		27	City & State		6. Election Campaign Financing		Fee Re 5.00	May Be
Zip		28 Unity	Zip	Country	Trust Fund Contribution 8. This corporation owes or has pa		Added t	
μıγ	25	29 Idress of Current Regist		30	Personal Property Tax due June     10. Name and Address of New Re	∋30. 🔲 Ye	is [	No ·
TA		Socions 607 0502 and 60	07 1508 Florida State	83 84 City	rooration submits this statement for the	FL 8		
Pursuant to office or re agent. I an	o the provisions of gisterod agont, or n familiar with, and	name of registerical agent and life	it applicable (NC	84 City Ites, the above-named cor authorized by the corpora forida Statutes.		PL purpose of cha pt the appointr	nging iti nent as	s registered registered
Pursuant to office or re agent. I ar SNATURE	o the provisions of gisterod agont, or n familiar with, and Signature, typed or printed		it applicable (NC	84 City Ites, the above-named cor authorized by the corpora lorida Statutes. ITE: Registered Agent signature req. 13.		DATE	nging iti nent as	s registered registered
Pursuant to office or re agent. I an BNATURE	o the provisions of agisterod agont, or n familiar with, and Signature, typed or printed DST PARBHU, CH	name of required agent and life OFFICE RS AND DIREC	nteppenetele (NC CTORS	84         City           ules, the above-named cor         authorized by the corpore           lorida Statutos.         11           11.1         11.1           12.0         NAME	ulred when reinstaling)	DATE	nging its nent as	s registered registered S IN 12
Pursuant te office or re agent. I ar SNATURE E E E E E E E E E E E E E E E E E E	o the provisions of agisterod agent, or n familiar with, and Signature, typed or printed DST PARBHU, CHI 2123 ORLEAN	nerre of requirered egent and life OFFICE RS AND DIREC UNI IS DRIVE	nteppenetate (NC CTORS	84         City           ules, the above-named cor         authorized by the corpore           lorida Statutes.         1           ITE: Registered Agent signature required         13.           1.1 TITLE         12 NAME           1.3 STREEF ADDRESS         13	ulred when reinstaling)	DATE	nging its nent as	s registered registered S IN 12
Pursuant ti office or re agent. I ar SNATURE E E E E E E T ADORESS -S1-ZIP	o the provisions of ogisterod agont, or n familiar with, and Signature, typed or printed DST PARBHU, CH 2123 ORLEAN TALLAHASSE DP	Name of required agent and the OFFICE RS AND DIREC UNI IS DRIVE E FL	nteppenetate (NC CTORS	84         City           ules, the above-named cor         authorized by the corpore           lorida Statutos.         11           11.1         11.1           12.0         NAME	ulred when reinstaling)	DATE	nging its nent as	s registered registered IS IN 12
Pursuant to office or re agent. Lar NATURE E E ET ADORESS -ST-ZIP E	o the provisions of agisterod agont, or n familiar with, and Signature, typed or printed DST PARBHU, CHI 2123 ORLEAN TALLAHASSE DP JIVAN, MANO	name of reactioned agent and the OFFICE RS AND DIREC JNI IS DRIVE E FL	IT APJ Jacobsko (NC STORS DELETE	84         City           Jlos, the above-named cor- authorized by the corpore forida Statutos.         1           TE: Registered Agent signature required 13, 1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 City - ST - ZiP 2.1 TITLE 2.2 NAME         1	ulred when reinstaling)	DATE	nging it nent as IECTOR Change	s registered registered IS IN 12
Pursuant ti office or re agent. Lar SNATURE E E E E E E E E E E E E E E E E E E	o the provisions of ogisterod agont, or n familiar with, and Signature, typed or printed DST PARBHU, CHI 2123 ORLEAN TALLAHASSE DP JIVAN, MANO 1350 W. TEN TALLAHASSE	DEFICE RS AND DIREC OFFICE RS AND DIREC UNI IS DRIVE E FL O NESSEE STREET	IT OFFIS	84         City           Jlos, the above-named cor- authorized by the corpore forida Statutos.         1           TE: Registered Agent signature required 13, 1.1 TITLE 12 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	ulred when reinstaling)	PL   purpose of cha pot the appointr DATE CERS AND DIF	nging it nent as IECTOR Change	s registered registered S IN 12 Additio
Pursuant ti office or re agent 1 ar SNATURE E E E E E E E E E E E E E E E E E E	o the provisions of ogisterod agont, or n familiar with, and Signature, typed or printed DST PARBHU, CHI 2123 ORLEAN TALLAHASSE DP JIVAN, MANO 1350 W. TEN TALLAHASSE DV	OFFICE RS AND DIREC UNI IS DRIVE E FL O NESSEE STREET E FL	IT APJ Jacobsko (NC STORS DELETE	84         City           Jlos, the above-named correct authorized by the corpore forida Statutos.         1           TE: Registered Agent signature required 13,         1           1.1 TIFLE         1           1.2 NAME         1.3 STREET ADDRESS           1.4 City-ST-ZiP         2           2.1 TIFLE         2           2.3 STREET ADDRESS         2.4 City-ST-ZiP           3.1 TIFLE         3.1 TIFLE	ulred when reinstaling)	PL   purpose of cha pot the appointr DATE CERS AND DIF	nging it nent as IECTOR Change	s registered registered IS IN 12
Pursuant to office or re agent. 1 an INATURE E E ET ADDRESS -ST-ZIP E E E E ST-ZIP E E	o the provisions of ogisterod agont, or n familiar with, and Signature, typed or printed DST PARBHU, CHI 2123 ORLEAN TALLAHASSE DP JIVAN, MANO 1350 W. TEN TALLAHASSE DV PATEL, KANT 12787 SAN F	OFFICE RS AND DIREC UNI IS DRIVE E FL O NESSEE STREET E FL	IT OFFIS	84         City           Jlos, the above-named cor- authorized by the corpore forida Statutos.         1           TE: Registered Agent signature required 13, 1.1 TITLE 12 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	ulred when reinstaling)	PL   purpose of cha pot the appointr DATE CERS AND DIF	nging it nent as IECTOR Change	s registere registered S IN 12 Additio
Pursuant to office or re egent. Lar INATURE E E E E E E E E E E E E E E E E E E	o the provisions of ogisterod agont, or n familiar with, and Signature, typed or printed DST PARBHU, CHI 2123 ORLEAN TALLAHASSE DP JIVAN, MANO 1350 W. TEN TALLAHASSE DV PATEL, KANT	DESSEE STREET E FL NAL Z.	IT OFFLANSITAGE (NC CTORS DELETE DELETE DELETE	84         City           Jlos, the above-named cor- authorized by the corpore forida Statutos.         1           TE: Registered Agent signature requires 13.         1           11.1 TITLE         1           12 NAME         1.3 STREET ADDRESS           1.4 CITY-ST-ZIP         2           2.1 TITLE         2           2.3 STREET ADDRESS         2.4 CITY-ST-ZIP           3.1 TITLE         32 NAME           3.3 STREET ADDRESS         3.4 CITY-ST-ZIP	ulred when reinstaling)		nging it nent as ECTOR Change Change	s registered registered S IN 12 Additio
Pursuant to office or re egent. Lar INATURE E E ET ADDRESS -ST-ZIP E E E E E E E E E E E E E E E E E E E	o the provisions of ogisterod agont, or n familiar with, and Signature, typed or printed DST PARBHU, CHI 2123 ORLEAN TALLAHASSE DP JIVAN, MANO 1350 W. TEN TALLAHASSE DV PATEL, KANT 12787 SAN F	DESSEE STREET E FL NAL Z.	IT OFFIS	84         City           Jlos, the above-named cor- lorida Statutos.         authorized by the corpora- lorida Statutos.           11:         1:           12:         Registered Agent signature required.           13:         1:           14:         1:           12:         NAME           13:         STREET ADDRESS           14:         City-St-ZiP           2:         TITLE           2:         NAME           2:         STREET ADDRESS           2:         4:           3:         STREET ADDRESS           2:         4:           3:         STREET ADDRESS           3:         STREET ADDRESS	ulred when reinstaling)		nging it nent as IECTOR Change	s registere registered S IN 12 Additio
Pursuant II office or re Bgent   ar NATURE E ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP E E ADDRESS -ST-ZIP E E	o the provisions of ogisterod agont, or n familiar with, and Signature, typed or printed DST PARBHU, CHI 2123 ORLEAN TALLAHASSE DP JIVAN, MANO 1350 W. TEN TALLAHASSE DV PATEL, KANT 12787 SAN F	DESSEE STREET E FL NAL Z.	IT OFFLANSITAGE (NC CTORS DELETE DELETE DELETE	84         City           Jlos, the above-named cor- authorized by the corpore forida Statutos.         1           TE: Registered Agent signature requires 13,         1           1.1 TITLE         1           1.2 NAME         1           1.3 STREET ADDRESS         1.4 CITY-ST-ZIP           2.1 TITLE         2           2.3 STREET ADDRESS         2.4 CITY-ST-ZIP           3.1 TITLE         32 NAME           3.3 STREET ADDRESS         3.4 CITY-ST-ZIP           3.1 TITLE         3.3 STREET ADDRESS           3.4 CITY-ST-ZIP         3.1 TITLE           3.3 STREET ADDRESS         3.4 CITY-ST-ZIP           3.1 TITLE         3.4 CITY-ST-ZIP           3.1 TITLE         3.4 CITY-ST-ZIP	ulred when reinstaling)		nging it nent as ECTOR Change Change	s registere registered S IN 12 Addition
Pursuant I office or re Bgent. Lar NATURE E ET ADDRESS -ST-ZIP E E ADDRESS -ST-ZIP E E E ADDRESS -ST-ZIP E E E ADDRESS -ST-ZIP	o the provisions of ogisterod agont, or n familiar with, and Signature, typed or printed DST PARBHU, CHI 2123 ORLEAN TALLAHASSE DP JIVAN, MANO 1350 W. TEN TALLAHASSE DV PATEL, KANT 12787 SAN F	DESSEE STREET E FL NAL Z.	IT OFFLANSITAGE (NC CTOFRS DELETE DELETE DELETE DELETE DELETE	84         City           Jlos, the above-named correction authorized by the corpore forida Statutos.         11           TE: Registered Agent signature required 13.         11           11.1 TITLE         12           12.         13.           1.1 TITLE         12           12.         13.           1.1 TITLE         12           12.         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         3.3 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         3.4. CITY-ST-ZIP	ulred when reinstaling)		nging it nent as ECTOR Change Change	s registere registered S IN 12 Additio
Pursuant II office or re Bgent   ar NATURE E ET ADDRESS -ST-ZIP E ET ADDRESS -ST-ZIP E E ET ADDRESS -ST-ZIP E E E ADDRESS -ST-ZIP	o the provisions of ogisterod agont, or n familiar with, and Signature, typed or printed DST PARBHU, CHI 2123 ORLEAN TALLAHASSE DP JIVAN, MANO 1350 W. TEN TALLAHASSE DV PATEL, KANT 12787 SAN F	DESSEE STREET E FL NAL Z.	IT OFFLANSITAGE (NC CTORS DELETE DELETE DELETE	84         City           Jlos, the above-named correct order subtorized by the corpore forida Statutos.         11           TE: Registered Agent signature required to the corpore forida Statutos.         13           11.1 TITLE         12 NAME           1.3 STREET ADDRESS         1.4 CITY-ST-ZIP           2.1 TITLE         2 NAME           2.3 STREET ADDRESS         2.4 CITY-ST-ZIP           3.1 TITLE         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           4.3 STREET ADDRESS         3.4. CITY-ST-ZIP	ulred when reinstaling)		nging it nent as ECTOR Change Change Change	s registere registered S IN 12 Addition Addition
Pursuant II office or re Bgent   ar NATURE E E1 ADDRESS -ST-ZIP E E1 ADDRESS -ST-ZIP E E E1 ADDRESS -ST-ZIP E E E ADDRESS -ST-ZIP E E	o the provisions of ogisterod agont, or n familiar with, and Signature, typed or printed DST PARBHU, CHI 2123 ORLEAN TALLAHASSE DP JIVAN, MANO 1350 W. TEN TALLAHASSE DV PATEL, KANT 12787 SAN F	DESSEE STREET E FL NAL Z.	IT OFFLANSITAGE (NC CTOFRS DELETE DELETE DELETE DELETE DELETE	84         City           Jlos, the above-named correction authorized by the corpore forida Statutos.         11           TE: Registered Agent signature required to the corpore forida Statutos.         13           T1: TITLE         12           13: STREET ADDRESS         14 CITY-ST-ZIP           21: TITLE         22 NAME           23: STREET ADDRESS         2.4 CITY-ST-ZIP           31: TITLE         32 NAME           33: STREET ADDRESS         3.4 CITY-ST-ZIP           41: TITLE         4.2 NAME           43: STREET ADDRESS         3.4 CITY-ST-ZIP           51: TITLE         5.2 NAME           33: STREET ADDRESS         3.4 CITY-ST-ZIP           51: TITLE         5.2 NAME           52: NAME         5.3 STREET ADDRESS	ulred when reinstaling)		nging it nent as ECTOR Change Change Change	s registere registered S IN 12 Addition Addition
Pursuant ti office or re agent 1 ar anATURE E E E E E ST-ZIP E E E E E ADDRESS -ST-ZIP E E E E E E E E ADDRESS -ST-ZIP E E E E E E E E E ADDRESS -ST-ZIP E E E E E E E ADDRESS -ST-ZIP E E E E E E ADDRESS -ST-ZIP E E E E E E ADDRESS -ST-ZIP E E E E E ADDRESS -ST-ZIP E E E E E ADDRESS -ST-ZIP E E E E E ADDRESS -ST-ZIP E E E E E ADDRESS -ST-ZIP E E E E E ADDRESS -ST-ZIP E E E E E ADDRESS -ST-ZIP E E E E E ADDRESS -ST-ZIP E E E E E ADDRESS -ST-ZIP E E E E E ADDRESS -ST-ZIP E E E E E ADDRESS -ST-ZIP E E E E E ADDRESS -ST-ZIP E E E E E ADDRESS -ST-ZIP E E E E ADDRESS -ST-ZIP E E E E ADDRESS -ST-ZIP E E E E ADDRESS -ST-ZIP E E E E ADDRESS -ST-ZIP E E E E ADDRESS -ST-ZIP E E E E ADDRESS -ST-ZIP E E E E ADDRESS -ST-ZIP E E E E E ADDRESS -ST-ZIP E E E E E ADDRESS -ST-ZIP E E E E ADDRESS -ST-ZIP E E E E ADDRESS -ST-ZIP E E E E E ADDRESS -ST-ZIP E E E E ADDRESS -ST-ZIP E E E E E ADDRESS -ST-ZIP E E	o the provisions of ogisterod agont, or n familiar with, and Signature, typed or printed DST PARBHU, CHI 2123 ORLEAN TALLAHASSE DP JIVAN, MANO 1350 W. TEN TALLAHASSE DV PATEL, KANT 12787 SAN F	DESSEE STREET E FL NAL Z.	IT OFFLANATACO (NC CTOFRS DELETE DELETE DELETE DELETE DELETE DELETE DELETE	84         City           Jlos, the above-named correct original statutos.         Statutos.           TE: Registered Agent signature required by the corpore forida Statutos.         13.           11.1 TITLE         12.           12.1 TITLE         12.           13.5TREET ADDRESS         1.4 CITY-ST-ZIP           21 TITLE         22.           23 STREET ADDRESS         2.4 CITY-ST-ZIP           31 TITLE         32.           32 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           4.3.         STREET ADDRESS           4.4.         CITY-ST-ZIP           5.1.         TITLE           5.3.         STREET ADDRESS           5.3.         STREET ADDRESS           5.4.         CITY-SI-ZIP	ulred when reinstaling)		nging it nent as ECTOR Change Change Change	s registere registered S IN 12 Addition Addition Addition Addition
Pursuant ti office or re agent. I ar SNATURE E	o the provisions of ogisterod agont, or n familiar with, and Signature, typed or printed DST PARBHU, CHI 2123 ORLEAN TALLAHASSE DP JIVAN, MANO 1350 W. TEN TALLAHASSE DV PATEL, KANT 12787 SAN F	DESSEE STREET E FL NAL Z.	IT OFFLANSITAGE (NC CTOFRS DELETE DELETE DELETE DELETE DELETE	84         City           Jlos, the above-named correction authorized by the corpore forida Statutos.         11           TE: Registered Agent signature required to the corpore forida Statutos.         13           T1: TITLE         12           13: STREET ADDRESS         14 CITY-ST-ZIP           21: TITLE         22 NAME           23: STREET ADDRESS         2.4 CITY-ST-ZIP           31: TITLE         32 NAME           33: STREET ADDRESS         3.4 CITY-ST-ZIP           41: TITLE         4.2 NAME           43: STREET ADDRESS         3.4 CITY-ST-ZIP           51: TITLE         5.2 NAME           33: STREET ADDRESS         3.4 CITY-ST-ZIP           51: TITLE         5.2 NAME           52: NAME         5.3 STREET ADDRESS	ulred when reinstaling)		nging it nent as IECTOR Change Change Change Change	s registere registered S IN 12 Addition Addition