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PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

830 S. STATE RD. 7



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # K64144

(4)

ALL FAMILY PROPERTIES, INC.

Mailing Address

930 S. STATE RD. 7 PLANTATION FL 33317-4523

FILED Apr 30 1997 8:00am Secretary of State

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B. Name and Address of Current Rigistered Agent ROZENSKY, MILTON 830 S 87 7 PLANTATION FL 33317 84 City FL 85 Zip Code 11. Fursuant to the processors of Sections 507 0502 and 607 1508. Horida Statutes, the above named corporation submits this statement for the purpose of changing its repistured agent a minimal minimal and accept the originations of Section 607 0502 and 607 1508. Horida Statutes, the above named corporation submits this statement for the purpose of changing its repistured agent a minimal minimal minimal accept the originations of Section 607 0505, Fordical Statutes. The above named corporation submits this statement for the purpose of changing its repistured agent a minimal minimal minimal manufactured by the corporation's board of directors. Hisrably accept the appointment as registered agent a minimal minimal manufactured by the corporation's board of directors. Hisrably accept the appointment as registered agent		ļ <u>-</u>	<u> </u>	317	D						199.032,
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SSO S SR 7 PLANTATION FL 33317	RO7				B1	Name					
PLANTATION FL 33317			•								
11. Furshand to the provisions of Sections 607.0502 and 607.1508. Floridal Statutes, the above-named corporation submits this statement for the purpose of changing like registered agent. I or took, vir the State of Floridal, Such change was authorized by the corporation's board of directors. Hereby accept the appointment as registered agent. I amiliar with, and accept the obligations of, Section 607.0505, Floridal Statutes with a development and registered agent. I amiliar with, and accept the obligations of, Section 607.0505, Floridal Statutes with the corporation's board of directors. Hereby accept ment as registered agent. I amiliar with, and accept the obligations of, Section 607.0505, Floridal Statutes with the corporation's board of directors. Hereby accept the appointment as registered agent. I amiliar with, and accept the obligations of, Section 607.0505, Floridal Statutes with the corporation's board of directors. Hereby accept the appointment as registered agent. I amiliar with, and accept the obligations of, Section 607.0505, Floridal Statutes with the corporation's board of directors. Hereby accept the appointment as registered agent. I amiliar with, and accept the obligations of, Section 607.0505, Floridal Statutes with the corporation's board of directors. Hereby accept the appointment as registered appointment as registered agent. I amiliar with, and accept the obligations of the product of the appointment as registered and the product of the product of the appointment as registered and the product of the produ			•		82	Street Add	lress (P.O. Box Number is	Not Acceptab	ole)		
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F Company) ,	10 7 <u>E</u>			
1. Pry. stant to the provisions of Socions 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE					64	Çity	į		EI	35 Zip (Code
office or registraced agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I Nereby accept the appointment is registered agent and annual memory and accept the obligations of, section 607-0505, Florida Statutes. Signature Property Pro	44 Duranent	to the use decree of Coolings CO7 C	1500 and 007 1500	Clarida Ctatut	as the show		t .	and for the a		onning it	- resistered
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12							<u>.</u>		,		
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14. I do 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			Frain late at the Prince		 	 	# := O==1:== 440 03101/0		_		10.0

mual report is true and accurate and that my signature shall have the same legal effect as if made under o trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name Lam an officer or director of the

SIGNATURE:

Daytime Phone #