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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

DOCUM 1. Corporation N SUNSHIN		5 (4)			
Principal Place of	f Rusiness	Mail:ng Address			
Principal Place of Business % HARVEY R, SCHNEIDER B892 152ND PLACE SOUTH DELRAY BEACH FL 33446		% HARVEY R. SCHNEIDER 8892 152ND PLACE SOUTH DELRAY BEACH FL 33446		3. Date Incorporated or Qualified 3a. Date of Last Report	
6 Oississ Dise		2a. Mailing Address	.,,	02/07/1989 0-	4/27/1995 Applied For
2. Principal Place	e or pasiness	26. Walling Address		65-0104557	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
Carlo State		City & State		6. Flection Campaign Financing	Fee Required \$5.00 May Be
City & State		28		Trust Fund Contribution	Added to Fees
Zφ	Country	Zip	Country	8. This corporation has lability to intangible to	x under s 199.032,
4	9. Name and Address of Curren	29	30	Florida Statutes Yes No 10. Name and Address of New Registered	Agent
	9. Name and Address of Conten	it negistereo Agent	B1 Name		
SCHNEIN	er, harvey r.		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
	RPORATE BLVD, NW		62 STREET ACC	Tess (1.0. Dox Number is Not zecopytholog	
SUITE 301			83		
BOCA RA	TON FL 33431		84 City		85 Zip Code
 	10 11 007 0500	10074500 51 14 014		FL ration submits this statement for the purpose of ch	anning its registered office
or registered familiar with,	d agent, or both, in the State of Flori , and accept the obligations of, Sect	da. Such change was authori	ized by the corporation's boa	rd of directors. Thereby accept the appointment as	registered agent. I am
SIGNATUREs _g	gnature, typed or printed name of registered agent		IOTE: Registere a Agent signal ire requir		DIDECTORS IN 19
12.	OFFICERS AN	D DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AND	Change Addition
TITLE NAME	d Greenberg, William	_ bittit	1.2 NAME	'	7 curado 🗀 comercia
STREET ADDRESS	8892 152ND PLACE		1.3 STREET ADDRESS		
Dity-St-ZIP	DELRAY BEACH FL		1.4.C(TY - ST - 7)P		
TITLE	D	DELETE	2 1 TITLE		Change Addition
NAME	GREENHUT, STEVEN E.		2.2 NAME		
SZERDCA TERTS	8892 152ND PLACE		2.3 STREET ADDRESS		
DITY-ST-ZIP	DELRAY BEACH FL D	T) DELFTE	2.4 CHY-ST-ZIP 3.1 TITLE		Change Addition
NAME	DINNERSTEIN, NORMA		3.2 NAME		
STREET ADDRESS	8892 152ND PLACE		3.3 STREET ADDRESS		
CITY-ST-ZIP	DELRAY BEACH FL		3.4 CITY - \$1 - ZIP		D Marie
TITLE		☐ DELLETE	4. 1 TILLE	'	Crange Addition
NAME			4.2 NAME 4.3 STREET ADDRESS		
STREET ADDRESS CITY-ST-ZIP			4.4 CITY - ST - ZIP		
TITLE		DELÉ 1E	5 1 TILE		Change Addition
NAME			5 2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
DITY-ST-ZIP		T3 DULLIC	5 4 CITY - S1 - ZIP		Change Addition
TITLE		☐ DEFELE	6 1 THTLE 62 NAME		T purendo [7] yourroll
NAME capella annibeco			63 STREET ADDRESS		
STREET ADDRESS CITY-ST-ZIP		<i>_</i> ,	3 4 CITY-ST-ZIP		
14 Ldo bereby	certify that the information supplied	with this and is voluntarily fu	rnished and does not qualify	for the exemption stated in Section 119.07(3)(k), Fi	orida Statutes. I further
oath; that I a	am an officer or director of the office Block 12 or Block 13 if changed or	OR TENORY IN SUSPICIONENT A BIOTRANTO A THE PRINTED NAME OF SIGNING OFFI	tegempowered to execute to yess WILLIAM 6	ale and that my signature shall have the same legal is report as required by Chapter 607, Florida Statu	tes; and that my name 1/07-