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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Socretary of State

<u> </u>	1996	<b>7</b>	PE CORPORATIONS		
DOCUN 1. Corporation FUNDIN		9 (7)		1 18 8 2 111 8 11 18 2 18 11 11 2 2 2 2	
Principal Place of Business Mailing Address  2101 W COMML BLVD 2101 W COMMERCIAL BLV S5500 #5500PA			il BLVD.		HB11 B1011 B1011 B1011 B1011 B1011 B1011 B1011
FT. LAUDERD US	ALE FL 33309	FT. LAUDERDALE FL US	33309	3. Date Incorporated or Qualified 03/10/1989	3a. Date of Last Report 01/19/1995
2. Principal Pla	ce of Business W COMMC Blub	2a. Mailing Address		4. FET Number 65-0106347	Applied For
21 <b>人〇〇</b> . Suite, ApJL #		Suite, Apt. #, etc.	· · · · · · · · · · · · · · · · · · ·		Not Applicable  \$8.75 Additional
22 55	000 A	27		5. Certificate of Status Desired	Fee Required
City & State	LAND FLZ	City & State		6. Election Campaign Financing	\$5.00 May Be
<sup>70</sup> 2 20	Country	Zip	Country	Trust Fund Contribution  8. This corporation has liability for i	Added to Fees intangible tax under s. 199.032.
24 うつ)	25 B WD	29	30	Florida Statutes  Yes	No
	9. Name and Address of Current	Hegistered Agent	81 Name	10. Name and Address of New R	egistered Agent
SAND, M				fress (P.O. Box Number is Not Acceptab	(a)
2101 W COMMERCIAL BLVD.				ness (1.0. cox normer is not receptate	
#5500 ₽			83		
FT. LAUDERDALE FL 33309			84 City		85 Zip Code
11. Pursuant to	the provisions of Sections 607.0502 a	and 607,1508, Florida Statu	tes, the above-named corpo	oration submits this statement for the pur and of directors. Thereby accept the appo	pose of changing its registered office
signature _	n, and accept the obligations of, Section, and accept the obligations of, Section, and accept the obligations of negligible again as	n 607.0505, Florida Statute	ROTE Registered Agent signature resum		[M]E
12.	OFFICERS AND	DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFI	**************************************
NAME	SAND, MARK	[] beet it	1. 1 TULE 1.2 NAME		Change Addition
STREET ADDRESS	8745 N.W. 17TH MANOR		1.3 \$TREET ADORESS		
CITY - ST - ZIF	CORAL SPRINGS FL		14 CHY-ST-ZIP	=======================================	
TITLE		☐ DELETE	2 1 THILE		Change [] Addition
NAME STREET ADDRESS			2.2 NAME 2.3 STREET ADDRESS		
City - S1 - ZiP			24 C/TY+ST Z/P		
TITLE		☐ DELETE	3 1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CHY-ST-ZIP THUE		DELETE	3 4 CHY - ST - 716*		Change Addition
NAME			4.2 NAMé		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY - S1 - ZIP		F16000	4.4 CHY+ST-7/P		
TITLE NAME		DELETE	5 1 TILLE 5 2 NAME		Change Addition
STREET ADDRESS			5.3 STREET ADDRESS		
C(TY - ST - 7)P			5.4 CITY - S1 - ZIP		
THEF		☐ DELETE	6 1711€		Change Addition
NAME			6.2 NAME		
STREET ADDRESS	-		6.3 STREET ADDRESS		
14. I do hereby	certify that the information supplied wi	th this filing is voluntarily fur	nished and does not qualify t	for the exemption stated in Section 119.0	07(3)(k), Florida Statutes Thurther
cert fy that t eath, that I	he information indicated on this annual	I report or supplemental and ation or the receiver or trust	nua! report is true and accura ee empowered to execute th	ate and that may signature shall have the sis report as required by Chapter 607, Fig.	same legal effect as if made under

SIGNATURE:

SIGNATURE AND TYPEO OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-15-95

133.7711