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

**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1996

| Suite, Apt. #, etc.    Suite, Apt. #, etc.   Suite, Apt. #, etc.   Suite, Apt. #, etc.   Suite, Apt. #, etc.   Suite, Apt. #, etc.   Section Campaign Financing City & State   City & State   City & State   Country   Zip   Country   Section Contribution   Added to Fees Added to Fees   No.   Section Campaign Financing   Added to Fees   No.   Section Campaign Financing   No.   No | 1. Corporation Nam    | e                                | 82004                                 | (8)                     | *                         |         |                   |   |                                       |                      |  |                                 |
|--|-----------------------|----------------------------------|---------------------------------------|-------------------------|---------------------------|---------|-------------------|---|---------------------------------------|----------------------|--|---------------------------------|
| Participal Place of Euseness   Mailing Address   S50 NW, 3151 AVENUE   POMPANO BEACH FL 33069-1149   S50 NW, 3151 AVENUE   POMPANO BEACH FL 33069-1149   S00 NW, 3151 AVENUE   South April 48 State   S00 NW, 3151 AVENUE   S00 NW, 31   |                       |                                  |                                       | (-)                     |                           |         |                   |   |                                       |                      | )( <b>8</b> ) <b>8</b> (8)8 <b>1</b> (8)1 <b>8</b> 8 | <u> </u>                        |
| SEO NW. 31ST AVENUE POMPANO BEACH FL 33069-1149   SEO NW. 31ST AVENUE POMPANO BEACH FL 33069-1149   Seo of Eusiness   2a. Mailing Address   A. FEI Number      | Principal Place of Bu | winger                           | h.d.                                  | niling Addrong          |                           |         |                   |   |                                       |                      |  |                                 |
| 2.   Principal Place of Business   2a   Mailing Address   25     Applied For St.   Applied For   | 950 N.W. 31ST A       | VENUE                            | IAIS                                  | 950 N.W. 31ST AVEN      |                           | 49      |                   |   |                                       |                      |  |                                 |
| 2. Malting Address   2a. Mailing Address   5c. Mailing Address   5 |                       |                                  |                                       |                         |                           |         |                   |   | alified                               | <b>3a</b> . Da       |  |                                 |
| Skite, Apt. #, etc.   Suite, Apt. #, etc.   27   | — ·                   | Business                         |                                       | Mailing Address         |                           |         |                   |   |                                       |                      | <b>⊢</b> +   | <del>- 1</del>                  |
| City & State   | Suite, Apt. #, etc.   |                                  |                                       | Suite, Apt. #, etc.     | <del></del>               |         |                   | ···   | red                                   |                      | \$8.75   | Additional                      |
| Zip    | City & State          |                                  |                                       | City & State            |                           |         |                   |   | cing                                  |                      | \$5.0  | 0 May Be                        |
| HARRIS, MARVIN C JR 950 NW 31ST AVE POMPANO BCH FL 33432  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, I am familiar with, and accept the obligations of, Section 607.0502, Florida Statutes.  SIGNATURE SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  THE PO DELETE 1.1 TILE 1.3 STREET ADDRESS CITY-SI-7/P POMPANO BEACH FL 1.4 CITY-SI-7/P POMPANO BEACH FL 1.5 TIRE DELETE 2.1 TILE 2.2 STREET ADDRESS CITY-SI-7/P POMPANO BEACH FL 2.1 TILE 2.2 STREET ADDRESS CITY-SI-7/P POMPANO BEACH FL 3.1 TILE 2.3 STREET ADDRESS CITY-SI-7/P 2.4 CITY-SI-7/P 2.5 STREET ADDRESS | Zip                   | <u>├</u> ─-1                     |                                       | Zip                     | <del>}</del>              | intry   |                   | 8. This corporation has liab  |                                       |                      | <del></del>  |                                 |
| HARRIS, MARVIN C JR 950 NW 31ST AVE POMPANO BCH FL 33432  82 Street Address (P.O. Box Number is Not Acceptable)  83 City  84 City  84 City  85 City  86 City  86 City  86 City  86 City  87 Code  87 Code  88 City  88 City |                       |                                  |                                       | lered Agent             | [30]                      | Γ       |                   |   |                                       |                      | d Agent  |                                 |
| 950 NW 31ST AVE POMPANO BCH FL 33432  84 City FL 85 Zip Code  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered of or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE Signature, typind or purities name of registered agent and title if applicable.  NOTE Registered Agent signature required when remainding.  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE PO DELETE 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 950 N.W. 31ST AVENUE 1.3 STREET ADDRESS POMPANO BEACH FL  DELETE 2.2 NAME SPREET ADDRESS CITY-ST-ZIP  TITLE DELETE 3.1 TITLE 1.1 TITLE 1.2 Chang3 Addition 1.3 Addition 1.4 City-ST-ZIP 1.4 City-ST-ZIP 1.5 Chang3 Addition 1.5 STREET ADDRESS CITY-ST-ZIP 1.5 Chang3 Addition 1.5 STREET ADDR |                       |                                  |                                       |                         |                           | 81      | Name              |   |                                       |                      |  |                                 |
| 950 NW 31ST AVE POMPANO BCH FL 33432  83  84 City  FL  85 Zip Code  11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered of or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0506, Florida Statutes  SIGNATURE  SIGNATURE  SUBMINITE  SUBMI |                       |                                  |                                       |                         |                           | 82      | Street Addr       | ess (P.O. Box Number is Not Ac  | centable                              | 1                    |  |                                 |
| ### City ### City ### City ####################################  |                       |                                  |                                       |                         |                           |         |                   |   |                                       | ,<br>                |  |                                 |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered of or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature. Specifical provided name of registered agent and tire I approache.  NOTE Registered Agent signature required when renetating:  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 NAME  HARRIS, MARVIN C., JR.  STREET ADDRESS  STREET ADDRESS  OFFICERS AND DIRECTORS  1.3 STREET ADDRESS  OFFICERS AND DIRECTORS IN 12 NAME  1.3 STREET ADDRESS  OFFICERS AND DIRECTORS IN 12 NAME  1.4 CITY-ST-ZIP  DELETE  2.1 TITLE  Chang: Addition  Chang: Chang: Chang: Addition  Chang: Chang: Chang: Chang: Chang: Addition  Chang: Chang | POMPANO               | BCH FL 33432                     |                                       |                         |                           | 83      |                   |   |                                       |                      |  |                                 |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered of or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Styruture, typed or printed name of registered agent and title 1 applicable (NOTE Registered Agent signature required when relistance DATE.  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  PO  |                       |                                  |                                       |                         |                           | 84      | City              |   |                                       |                      | . 85 Zış   | Code                            |
| or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.  SIGNATURE  Signature. Typed or plinted name of registered agent and tile 1 applicable.  NOTE Registered Agent signature required when remistating.  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  TITLE  NAME  HARRIS, MARVIN C., JR.  STREET ADDRESS  POMPANO BEACH FL  DELETE  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  POMPANO BEACH FL  DELETE  2.1 TITLE  Change  Addition  Addition  Change  Addition  DELETE  2.1 TITLE  Change  Addition  Addition  DELETE  3.1 TITLE  Change  Addition  Change  Addition  Addition  DELETE  3.1 TITLE  Change  Addition  Change  Addition  Change  Addition  Change  Addition  Addition  Addition  DELETE  3.1 TITLE  Change  Addition  Change  Addition  Change  Addition  Addition  Addition  Addition  DELETE  3.1 TITLE  Change  Addition  Change  Addition  Change  Addition  Addition  Change  Addition  Addition  Addition  Addition  Addition  Change  Addition  Change  Addition  Addition  Addition  Addition  Addition  Change  Addition  Change  Addition  Change  Addition  Addition  Change  Addition  Addition  Change  Addition  Addition  Change  Chang | dd f)                 | The second second                | 007.0500 1.00                         | 7.4500 Ft. 11. Out.     |                           |         |                   |   |                                       |                      |  |                                 |
| SIGNATURE   Signature, typed or printed name of registered agent and title. I applicable   NOTE Registered Agent signature required when reinstating   DATE  | or registered age     | ent, or both, in the Sta         | ite of Florida. Such                  | i change was authorize  | s, the acc<br>id by the d | ocrpo   | ration's boar     | ation submits this statement for<br>d of directors. I hereby accept th  | rne purpo<br>ne appoir                | ose or c<br>ntment a | nanging its r<br>as registered                       | agistered offici<br>agent. I am |
| Signature, typed or juinted name of registered agent and the Lappitcable   (NOTE Registered Agent signature registered when reinstating):   DATE   |                       | accept the obligation            | is of, Section 607.0                  | J505, Florida Statutes. |                           |         |                   |   |                                       |                      |  |                                 |
| TITLE  |                       | ru, typed or printed name of req | gistered agent and title if a         | ppicable (NOT           | É Registerec              | Agent   | signature require | d when reinstating)   |                                       | DATE                 |  |                                 |
| NAME   |                       |                                  | CERS AND DIREC                        |                         | 13.                       |         |                   | ADDITIONS/CHANGES 1   | O OFFIC                               | ERS AN               | ND DIRECTO   | RS IN 12                        |
| STREET ADDRESS   950 N.W. 31ST AVENUE   1.3 STREET ADDRESS   1.4 CITY-ST-ZIP   | -                     | _                                | N ID                                  | DELETE                  | 1.1 T                     | ITLE    |                   |   |                                       |                      | ☐ Change   | Addition                        |
| CITY-ST-ZIP         POMPANO BEACH FL         14 CITY-ST-ZIP           THILE         DELETE         2.1 TITLE         Change Addition           NAME         22 NAME           STREET ADDRESS         2.3 STREET ADDRESS           CITY-ST-ZIP         2.4 CITY-ST-ZIP           TITLE         DELETE         3.1 TITLE         Change         Addition           NAME         3.2 NAME   |                       |                                  |                                       |                         | 1                         |         |                   |   |                                       |                      |  |                                 |
| TITLE         DELETE         2.1 TITLE         Chang:         Addition           NAME         22 NAME         23 STREET ADDRESS         CITY-ST-ZIP         CITY-ST-ZIP         CTTY-ST-ZIP         Chang:         Addition           NAME         32 NAME         32 NAME         Addition         Addition         Addition  |                       |                                  |                                       |                         |                           |         | 1                 |   |                                       |                      |  |                                 |
| NAM!         2 2 NAME           STREET ADDRESS         23 STREET ADDRESS           CITY-ST-ZIP         24 CITY-ST-ZIP           TITLE         DELETE         3 1 TITLE         Change         Addition           NAME         32 NAME  |                       | OIII ANO DESCIT                  | · · · · · · · · · · · · · · · · · · · | € DELETE                |                           |         | - Z(P             |   | · · · · · · · · · · · · · · · · · · · |                      | Changa   | ✓ Addition                      |
| STREET ADDRESS         2.3 STREET ADDRESS           CITY - ST - ZIP         2.4 CITY - ST - ZIP           TITLE         DELETE         3.1 TITLE         Change         Addition           NAME         3.2 NAME         3.2 NAME          Addition  |                       |                                  |                                       |                         |                           |         |                   |   |                                       |                      | [] Chang,  | [] voquion                      |
| CITY - ST - ZIP         2.4 CITY - ST - ZIP           TITLE         DELETE         3.1 TITLE         Change         Addition           NAME         3.2 NAME         3.2 NAME         Addition   |                       |                                  |                                       |                         |                           |         | DORESS            |   |                                       |                      |  |                                 |
| TITLE         DELETE         3.1 TITLE         Change         Addition           NAME         32 NAME  | CITY-ST-ZIP           |                                  |                                       |                         | 1                         |         |                   |   |                                       |                      |  |                                 |
|  | TITLE                 |                                  |                                       | DELETE                  |                           |         |                   |   |                                       |                      | ☐ Change   | ☐ Addition                      |
| STREET ADDRESS 33 STREET ADDRESS   | NAME                  |                                  |                                       |                         | 32 N                      | AME     |                   |   |                                       |                      |  |                                 |
|  | STREET ADDRESS        |                                  |                                       |                         | 33 S                      | TREET A | ADDRESS           |   |                                       |                      |  |                                 |
| CITY-ST-ZIP 34 CITY-ST-ZIP   |                       | <del></del>                      |                                       |                         |                           |         | - ZIP             | ·····   |                                       |                      |  |                                 |
|  |                       |                                  |                                       | ☐ DELETE                |                           |         |                   |   |                                       |                      | ☐ Change   | ☐ Addition                      |
| NAME 42 NAME   | i                     |                                  |                                       |                         |                           |         |                   |   |                                       |                      |  |                                 |
| STREET ADDRESS 43 STREET ADDRESS   |                       |                                  |                                       |                         |                           |         |                   |   |                                       |                      |  |                                 |
| CITY-ST-ZIP         44 CITY-ST-ZIP           TITLE         DELETE         5 1 TITLE         Change         Addition  |                       |                                  |                                       | DELETE                  |                           |         | - Z P             |   |                                       |                      | Changu   | Addition                        |
| NAME 52 KAME   | Į.                    |                                  |                                       |                         |                           |         |                   |   |                                       |                      | C. G. auth.  | C Addition                      |
|  | STREET ADDRESS        |                                  |                                       |                         |                           |         | DDRESS            |   |                                       |                      |  |                                 |
|  | CITY - ST - ZIP       |                                  |                                       |                         |                           |         |                   |   |                                       |                      |  |                                 |
|  | TITLE                 |                                  |                                       | DELETE                  | ·                         |         |                   |   |                                       |                      | Change   | Addition                        |
| CITY-ST-ZIP 54 CITY-ST-ZIP   | NAME                  |                                  |                                       |                         | 6.2 N/                    | Mé      |                   |   |                                       |                      | •  |                                 |
| CITY-SI-ZIP         5 4 CITY-SI-ZIP           TITLE         DELETE         6.1 TiTLE         Change: Addition  | STREET ADDRESS        |                                  |                                       |                         | 6.3 ST                    | REET A  | DDRESS            |   |                                       |                      |  |                                 |
| CITY-S1-ZIP         5.4 CITY-S1-ZIP           TITLE         DELETE         6.1 TiTLE         Change: Addition           NAME         6.2 NAME  | CITY-ST-ZIP           |                                  |                                       |                         |                           | TY-ST-  |                   | or the exemption stated in Section<br>te and that my signature shall ha |                                       |                      |  |                                 |

oath; that I am an officer or director of the corporation or the receiver or fustee 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 on an attachment with an address.

SIGNATURE:

4-26-96 305-341-3137