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

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

	AL REPORT 996	2 (C. 1977)	ary of State CORPORATIONS		
DOCUM 1. Corporation N	IENT # L352	.35 (5)			
ANICOR	RP, INC.				n aug dean arbit arbit bidir bidir bidir bidir
Principal Place o	/ Business	Mailing Address		<u>1 </u>	ii arii alen alan olon olon bion sion sion
C/O R FOSMOEN 2012 NE 122ND RD MIAMI FL 33181		C/O R FOSMOEN			
		2012 NE 122ND RD MIAMI FL 33181			
				3. Date Incorporated or Qualified	3a. Date of Last Report
		De Malling Address		12/11/1989 4. FEI Number	05/11/1995 Applied For
2. Principal Plac	ce of Business	2a. Mailing Address		65-0172189	Not Applicable
Suite, Apt. #,	etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
22		27]			Fee Required
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
23 Zip	Country	Zip	Country	8. This corporation has liability or	
24	25	29	30	Florida Statutes Yes	
	9. Name and Address of Cu	irrent Registered Agent	81 NATE	10. Name and Address of New I	
			1410		NDEN
				dress (P.O. Box Millinber is Not Acceptal) - 12 875
2012 NE 122 RD NO MIAMI FL 33181				3 = 3 = 1 \ 1	
140 MIV	WII 1 E 33101		84 City 🔨		85 Zip Code
				VAMI	FL 33/3/
11. Pursuant to	the provisions of Sections 607.	0502 and 607.1508, Florida Statu Florida, Such change was authori	ites, the above-named corpi ized by the corporation's bo	oration submits this statement for the puard of directors. I hereby accept the app	printment as registered agent. I am
familiar with	n, and accept the obligations of,	Schon 607,0505, Florida Statute	es.		4/30/96
SIGNATURE _	Standare, typed or printed name of registered	7.	IOTE: Registered Agent signature requi	ired when rea stating)	LIATE
12.		S AND DIRECTORS	13.		FICERS AND DIRECTORS IN 12
TITLE	8	[] DELETE	1	5x46am	Change Addition
NAME	FOSMOEN, RICHARD		1.2 NAME		4 82 52
STREET ADDRESS	2012 N. E. 122 RD.		1.3 STREET ADDRESS	My Arms Pit	中 82分 33131
CITY-ST-ZIP	N MIAMI FL	DELETE	2 1 TITLE	injustine i Co	Change Addition
NAME	FOSMOEN, LIGIA	<u>.</u>	2.2 NAME		
STREET ADDRESS	2012 N.E. 122 BLVD		2.3 STREET ADDRESS		
CITY-ST-ZIP	N MIAMI FL		2.4 CITY - ST - ZIF		Change Addition
TITLE		☐ DELETE	3 1 TITLE		El outrido El vocation
NAME			3.2 NAME 3.3 STREET ADDRESS		
STREET ADDRESS			3 4 CITY - ST-ZIP		
CITY-ST-ZIP TITLE		DELETE	4. 1 TITLE		☐ Change ☐ Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP		For DELETE	4.4 CHY- ST-ZIP		Change Addition
TITLE		DELETE	5 1 TITLE 5.2 NAME		The strange of the strange of
NAME			5.3 STREET ADDRESS		
STREET ADDRESS			5.4 CITY-ST-7.2		
CITY-ST-ZIP TITLE		DELETE	6 1 THILF	, , , , , , , , , , , , , , , , , , , ,	Change Addition
NAME			6.2 NAME		

6.3 STREET ADDRESS

6.4 CITY - S1 - ZIP

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

STREET ADDRESS

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 13 if changed, or on an attachment with an address. 3719116

CR2E034 (12/95)