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

PROFIT CORPORATION ANNUAL REPORT



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

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DOCUMENT # 1. Corporation Name

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2573 MV 59TH ST BOCA RATON FL 33496 US 2573 MV 59TH ST BOCA RATON FL 33496 US 3a. Date Incorporated or Qualified 3a. Date of Last Report 12/22/1989 04/13/1985	Principal Place	of Business	Mailing Address					
2. Francipal Place of Business 2a Mailing Address 2/2/2/1989 0.4/13/1995 0.4/1	2573 NW 591 BOCA RATOR	TH ST	2573 NW 59TH ST BOCA RATON FL 334	496				
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Suite, Apil. #, etc. 27	⊢	ace of Business	η			4. FEI Number		Applied For
City & State		#, etc.					\$8.75	Not Applicable Additional
28				·			- Fee I	
Zep	23	,	├ ──					
Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent	Ζιρ	<u>⊢</u> ¬ ′	r — ·	—	try	1		199.032,
MARZOUCA, DOMINIC 2573 NW 59TH ST BOCA RATON FL 33496 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code 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 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, or both in the State of Florida Statutes. SIGNATURE SIGNATURE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 14. AME MARZOUCA, DOMINIC C. 2573 NW 59TH ST BOCA RATON FL 14. Offi-51-78 BOCA RATON FL 14. Offi-51-78 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 16. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 17. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 10. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 11. THE	24			30				
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12.	or register familiar wit	ed agent, or both, in the State of Flor th, and accept the obligations of, Sec	ida. Such change was author ition 607.0505, Florida Statute	ized by the co as.	rporation's boar	d of directors. I hereby accept the appx	ointment as registered	agent. I am
12.	SIGNATURE".	Signature, typed or put ted name of registered age	it and title if applicable : (f)	NOTE: Registered A	goal signature requirer	d when conclutival	DATE	
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6. For hereby certify that the information supplied with this filing is voluntarily furnished and doos 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 12 or Block 13 of changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-18-36

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