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

1996

DOCUMENT # L39911

(7)

		OF LIFE	, INC.											
Principal Place of Business Mailing Address														
2388 N FEDERAL HIGHWAY 2388 N FEDERAL HIGHWA FORT LAUDERDALE FL 33305 FORT LAUDERDALE FL 33														
											Date Incorporated or Qualified 12/26/1989		te of Last I 04/04/1 9	
2. 21	. Principal Place of Business				2a. Mailing Address				4.	. FEI Number 65-0178183		-	Applied For Not Applicable	
1	Suite, Apt. #, etc.				Suite, Apt. #, etc.				5.	. Certificate of Status Desired			5 Additional	
22	City & State				City & State				 _	Floation Compaign Financias			Required	
23				28	28						Election Campaign Financing Trust Fund Contribution			00 May Be led to Fees
24	Zφ	Gountry 25			Zip Coui 29 30			ntry			This corporation has liability for Florida Statutes	intangible No	tax under :	s 199.032,
ļ <u>.</u>	9. Name and Address of Current				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1			1			. Name and Address of New I	_	3 Agent	
							81 Name							
OPPENHEIMER, JAMES K. 2500 NO FEDERAL HWY-#202 238								-	Street Addres	ss (P	P.O. Box Number is Not Accepta	ble)		
		DERDALE F			N FEDERAL HW ERDALE FL 33305		83	┞						
			F1	LAODER	CAME ID 55.	303	84	_	City				los I	Zip Code
												FI	_	•
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 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 familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.													registered office ad agent. I am	
SK	GNATURE .	Street in 1227	or printed name of registeri											
12		Signature, typeo t	OFFICER					signature required v	when r	ADDITIONS/CHANGES TO OFF	DATE FICERS AN	ID DIRECT	ORS IN 12	
TIT	LF	DPT		.,	DELETE		1. 1 TITLE				· · · · · · · · · · · · · · · · · · ·		Change	Addition
NAME		OPPENHEIMER, JAMES K.					1.2 NAME							
STR	REET ADDRESS	1 10 S.E. 6TH S T. 2388 N FT. LAUDERDALE FL 333			_		1.3 STREET ADDRESS		DDRESS					
	Y-ST-ZIP	DVS	DE:HDALE FL	33305	- Decree		1.4 CITY - S	π-	ZIP					
TITE		GERBER, RICHARD			☐ DELETE		2. 1 TITLE						☐ Change	Addition
NA!	VIE REEL ADDRESS		., NOTIONS E-24TH STREET	2200 N	V Federal H		2.2 NAME	4.5	00000					
	Y-ST-ZIP		DERDALE FL	33305	A Legerar W	wy	2.3 STREET 2.4 CITY-S							
Titl				33303	[] DELETE		3. 1 TITLE	,,,	ZIF				Change	[] Addition
NA!	ME					1	3.2 NAME							_
STA	REET ADDRESS					ľ	3.3. STREE	ΓAI	DDRESS					
CIT	Y - ST - ZiP						3.4 CITY - S	7-	ZIP					
TITL	_E				DELETE		4. 1 TITLE						☐ Change	☐ Addition
NAM	ME						4.2 NAME							
STA	EET ADDRESS						4.3 STREET	ΑE	DDRESS					
	Y-ST-ZIP						4.4 CHY-S	1-	ZIP					
TITL					☐ DEFELE		5 1 TITLE						☐ Change	☐ Addition
NA							5.2 NAME							
	REFT ADORESS						5 3 STREET							
CIT TITI	Y-S1-ZIP				DELETE	············	54 CHY-ST-ZIP						Change	Addition
NAN						ľ	6 1 TITLE 62 NAME							
	REET ADDRESS					Į.	6.3 STREET	۸r	DDBESS					
	Y-ST-ZIP						6.4 CITY-S							
	. I do hereby	certify that	the information sup	plied with thi	is filing is voluntarily fu	irnia ied	and doe	s r	not quality for	the	exemption stated in Section 119	.07(3)(k), F	lorida Stat	ites. I further
	certify that oath; that I appears in	the informati am an office Block 12 or	on indicated on this er or director of the Block 13 if change	s annual repo corporation d, or on an a	ort or supplemental ar or the receiver of this attachment with ari ad	apiual re itee emp Idress.	port is tru powered t	ie to	and accurate execute this i	e and repo	I that my signature shall have the ort as required by Chapter 607, F	same lega Iorida Statu	al effect as utes; and tr	if made under nat my name

SIGNATURE: James Oppenheimer

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/96 954-565-7423