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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # L57933

1. Corporation Name

(8)

RANYON INC.

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| Principa! Place of | f Business | Mailing Address | | | I CERCIANI DAI AUSIC CARAN UNION (11100 | ant vie tf viet l | #1#31 #F# Ff |) |
| 2600 DOUGLAS | S RD | 2600 DOUGLAS RD | | | | | | |
| PH-5 | | PH-5 | 00104 0107 | | | | | |
| CORAL GABLES FL 33134-6127 CORAL GABLES FL 33 | | 33134-6127 | | 3. Date Incorporated or Qualified 3a. Date of Last Report 03/16/1990 03/24/1995 | | | • | |
| | | | | | 03/16/1990 | | | |
| 2. Principal Plac | e of Business | 2a. Mailing Address | | | 4. FEI Number 65-0180009 | | | pplied For lot Applicable |
| <u> </u> | | Suite, Apt. #, etc. | | | | | | Additional |
| Suite, Apt. #, | etc. | 27 Suite, Apit. #, etc. | | | 5. Certificate of Status Desired | | - - · · | Required |
| City & State | | City & State | | | 6. Election Campaign Financing | | \$5.00 | May Be |
| 3 | | 28 | | | Trust Fund Contribution | | | to Fees |
| Z _I p | Country | Zp | Cour | ntry | 8. This corporation has liability for in Florida Statutes XI Yes | | under s | 199.032, |
| <u> </u> | 25 Name and Address of Curr | 29 29 Agent | 30 | | 10. Name and Address of New Re | | gent | |
| | 9. Name and Address of Coll | etti negistered Agent | | 81 Name | | | | |
| | ATION INFORMATION SERVI | CES INC | | 00 00 00 00 | ddress (P.O. Box Number is Not Acceptable | <u>a)</u> | | |
| 1201 HA | | OLO IIIO | ļ | 82 Street Ad | догеза (п.с. род матре в мосестврава | ~, | | |
| | ASSEE FL 32301 | | ļī. | | | | | |
| TALCH IA | 100EE 1 E 0E00 1 | | | 84 City | | | 85 Zıç | Code |
| | | | 1 | | poration submits this statement for the purp | FL | | |
| SIGNATURE | , and accept the obligations of Se | | | Agent signature requ | uirad when reinstating) | DATE | | |
| familiar with SIGNATURE | Signature, typod or printed name of registered aç | gont and title a applicable | (NOTE: Registered | Agent signature requ | | | DIDECTO | OC IN 10 |
| familiar with SIGNATUREs 12. | Signature, typod or printed name of registered aç | gent and title it supplicable | (NOTE: Registered | | ured when reinstating) ADDITIONS/CHANGES TO OFFI | CERS AND | DIRECTO | RS IN 12 |
| familiar with SIGNATURE S 12. | Signature, typod or printed name of registered ag OFFICERS A | gont and title a applicable | (NOTE: Registered | TLE | | CERS AND | | |
| familiar with SIGNATURES 12. IITLE VAMS | OFFICERS A S FERNANDEZ, MARTHA | gent and title it supplicable | (NOTE: Registered 13. 1 1 Til 1.2 N/ | TLE | | CERS AND | | |
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SIGNATURE: 3/1/
SIGNATURE: SIGNATURE OF SIGNING OFFICER OR DIRECTOR Clark

3/1/96 (305) 461-2142 Daytime Phone #