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PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: BARBARA



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

1996

	' ENTERPRISES, INC.	4 (1)						
	e of Business	Mailing Address						
6 Barry Levey 1657 n Ocean Blyd #9 Ioca Raton Fl 33431		% BARRY LEVEY 2657 N OCEAN BLVD #9 BOCA RATON FL 33431		Date Incorporated or Qualified				
					05/21/1990	1	2/24/19	•
Priocipal P	lace of Business	2a. Mailing Address			4. FEI Number			Applied For
Suite, Apt.	#. etc	Suite, Apt. #, etc.			65-0195002			Not Applicat
City & State		27] Otty & State		5. Certificate of Status Desired		Fee	Additional Required	
	······································	28			6. Election Campaign Financing Trust Fund Contribution			O May Be d to Fees
Zip: 	Country 25	Ζφ 29	Country 30	у	8. This corporation has liability for Florida Statutes	intangible t		
	9. Name and Address of Curren	nt Registered Agent			10. Name and Address of New I	Registered	Agent	
LEVEY	RADDV		81					
LEVEY, BARRY 2657 N OCEAN BLVD			82 Street Ac		ress (P.O. Box Number is Not Acceptal	ble)		
#9			83	B				
BOCA R	VATON FL 33431		84	City			85 Z	p Code
Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes or registered agent, or both in the State of Florida Statutes				FI				
or register fæmliar wi	red agent, or both, in the State of Flore ith, and accept the obligations of, Sect	da. Such change was author lion 607.0505, Florida Statut	rized by the corp es.	named corpo poration's boa	ration submits this statement for the pu and of directors. I hereby accept the app	rpose of ch iointment a:	s registered	l agent. I am
fændlar wi	th, and accept the obligations of Sections	da Such change was author lion 607.0505, Florida Statuti	NOTE Rogistered Age	ooration's boa	ard of directors. I hereby accept the app	DATE	s registered	l agent. I am
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ARBARA LEVEY SIGNING BERGER OF DIRECTOR LEVY COP.