FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT





FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

Į Ę.	OCUN Corporation EMPLO	Name	# L844 4 SING SYSTEMS	\ -)									
Principal Place of Business Mailing Address									i iodarom bot (d	(## EURIH BUBH BUB		
8414 14TH STREET. W. BRADENTON FL 34207 US			6414 14TH STREET, W. BRADENTON FL 34207 US				DO NOT WRITE IN THIS SPACE							
	-			•				İ	3. Date Incorpora	ted or Qualified				
Ļ	57 1 15								05/21/1990)				
	Principal Pla	Place of Business 2a. Mailing Address			955				4. FEI Number				Applied For	
21	Sulte, Apt. #	etc		Suite Ant #	Suite, Apt. #, etc.				65-0205563				ot Applicable	
22	Daile, rept. ii	, 010.		<u>├</u>	27				5. Certificate of St	tatus Desired		•	Additional equired	
l	City & State			City & State					6. Election Campa	aign Financing			May Be	
23	<u> </u>			28	28				Trust Fund Cor			•	to Fees	
	Zip	Country Zip			Country	у		B. This corporatio	n owes or has p	aid the c				
24			25	29	30)				rly Tax due Jun			No	
				rent Registered Agent		81	Г		10. Name and Add		egistere	d Agent		
	MUITARET, MICHAEL 3							NIE	L J Sul	LIVAN				
6414 14TH ST W BRADENTON FL 34207					82	Street	Addres	s (P.O. Box Number	r is Not Accepta	rple)				
						83								
						84	CITY	ADE	UTON		F	85 Žip	Code -207	
	 Pursuant to office or re- agent. I am SNATURE	othe provis gistered ag n familiar wi	ions of Sections 607.0 jent, or both, in the Sta th, and accept the ob	502 and 607.1508, Florida ate of Florida. Such chang ligations of, Section 607.0	a Statutes, le was auti 1505, Florid	the abov horized b la Statute	e-named y the cor s.	corporation	ation submits this st is board of director	atement for the s. I hereby acce		of changing i opointment as	ts registered registered	
Signature typed or pented name of registered post and title if applicable (NOTE)							ent signaturi	e required	when reinstating)		DATE			
12		*	OFFICERS A	AND DIRECTORS	CTC	13.		T. /	ADDITIONS/CHA	ANGES TO OFFI	CERS A			
NAJ		BATHER BIOLINE C		1.1 TITLE		No.	Distant	(Change	Addition			
	EET ADDRESS		TH STREET, W.			1.2 NAME	I ADDRESS		L DUNCAN H 14TH ST					
	Y-ST-ZIP	BRADEN	,			1.4 CITY - 5			DENTON, F		7			
TITE		D	TONTE	☐ DEL	ETE	2.1 TITLE	51-ZIP	V	DENTON, P	C 0100	1	Change	Addition	
NA	AE	BONGA	RT, EDWARD L.			2.2 NAME		ואוו	DA BAILEY	١ .				
ŞTR	EET ADDRESS	-	TH STREET. W			2.3 STREET	ADDRESS		4 14TH ST					
CIT	Y-ST-ZIP		ITON FL			2 4 CITY-	ST-ZIP	1 *	DENTON, F					
TITE	E	CEOP		DEL	ETE	3.1 TITLE		CFI)			Change	Addition	
NAA	AE	11052111 01 02 1101					3.2 NAME DA		IEL J JUU	HVAN			•	
STR	EET ADDRESS	• • • • • •	th Street, W.			3.3 STREET	ADDRESS		t 1474 STV					
_	Y-ST-ZIP		ITON FL			3.4. CITY -	ST-ZIP	BR	ADENTON,	FL 3420	7			
TITE		CFOD		DEL	ETE	4.1 TITLE			•			Change	Addition	
NAM			L J. MONAKEY			4. 2 NAME								
	EET ADDRESS		TH STREET, W.			4.3 STREET								
_	/-ST-ZIP	BRADEN	HUN FL	DEL	CTC	4.4 CITY - S	T - ZIP	⊢ −				Ohana	1.4400	
TITL				UCC	L 1 L	5.1 TITLE 5.2 NAME						Change	Addition	
	EET ADDRESS						ADDRESS							
	r-St-ZIP					5.3 STREET								
FITL				DEL	ETE	5.4 CITY- S 6.1 TITLE	11-ZIP	 				Change	Addition	
NAN	i i					6.2 NAME								
	EET ADDRESS					6.3 STREET	ADDRESS	[i	
						1		l					ì	

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or suppliemental 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 if changed, or on an attachment with an address.

May 13 1998 8:00am

Secretary of State