## 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

407-746-7107

1996

DOCUMENT #
1. Corporation Name

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Principal Place	of Business	Mailing Address			I HAFIKON, DON YANKI NAGIN OCIDI TRIDD HIN DIGIN DIGIN DIRIN ONNIN BIRIN DIRIN DIRIN DIRIN DIRIN DIRIN DI				
75 EAST IND JUPITER FL 3	IANTOWN ROAD 33477	75 EAST INDIANTOWN ROAD JUPITER FL 33477							
						3. Date Incorporated or Qualified 07/13/1990	3a. Date of Las	•	
<b>2.</b> Principal Pla	ace of Business	2a. Mailing Address	2a. Mailing Address			4. FEI Number		Applied For	
21		26				65-0210803		Not Applicable	
Suite, Apt. #	₹, <b>0</b> lc.	Suite, Apt. #, etc.				5. Certificate of Status Desired \$8.75 Additional Fee Required			
City & State		City & State				Election Campaign Financing     Trust Fund Contribution	9 \$5.00 May Be Added to Fees		
Zip 24	Country 25	Zip <b>29</b> ]	Country 30			This corporation has liability for intangible tax under s 199.032,     Florida Statutes  Yes  No			
	9. Name and Address of Currer	nt Registered Agent				10. Name and Address of New Re			
			8	1 1	lame		<u>-</u>		
BUSTAM	ANTE, HUGO R.		B	2 5	treet Ad	dress (P.O. Box Number is Not Acceptable	1		
1101 SE	AFARER CIRCLE FL 33477			3		STOOD (1. C. BOX HONDON IS NOT NOCOPIAGE	,		
JOFFIEN	FL 33477		L	<u> </u>	lity		<b></b> 85	Zip Code	
				- [ ]	•		- F1. ! I	•	
Or registere	o the provisions of Sections 607.0502 ad agent, or both, in the State of Flori h, and accept the obligations of, Sect	ua, auch change was autoboze	ia ny the cai	-nan rpora	ned corpo tion's bo	oration submits this statement for the purp ard of directors. Thereby accept the appoi	ose of changing in Intract as registe	ts registered office red agent. I am	
SIGNATURE _	Signature, typed or printed name of registered agent	and tide if applicable. (NC)	FL: Hogistered Ag	ent sig	nature requi	eid when remislating	DATE		
12.	OFFICERS AN	D DIRECTORS			ADDITIONS/CHANGES TO OFFICE		TORS IN 12		
TIFLE	D	DELETL	1. 1 TITL	E			☐ Chane	e Addition	
NAME	Farber, Benjamin		1.2 NAM	E	ļ				
STREET ADDRESS	75 E. Indiantown Rd.		1.3 <b>\$</b> TRE	ET AD	ORESS				
CITY-ST-ZIP	JUPITER FL		1.4 CITY	- S1 - Z	P				
TITLE	D	DELETE	2. 1 1111	E			Chang	e Addition	
NAME	Bustamante, Hugo R		2.2 NAM	E					
STREET ADDRESS	75 E INDIANTOWN ROAD	23		2 3 STREET ADDRESS					
CITY-ST-ZIP	Jupiter Fl		2.4 CITY	- S1 - Z	P				
TITLE		☐ DELETE	3 1 TITL	E			[] Chang	e Addition	
NAME {			3 2 NAM	E					
STREET ADDRESS			3.3. S1RI	ET AD	DRESS				
CITY-ST-ZIP			3.4 CITY	-ST-7	p				
THILE		DELETE	4 11111	E			Chang	e 🔲 Addition	
NAME			4.2 NAM	É					
STREET ADDRESS			4.3 STRE	ET ADE	RESS			•	
CITY-ST-ZIP			4.4 CITY	-SI - Z	P				
TITLE		☐ DEFEIF	5 1 THE	E			☐ Chang	e 🔲 Addition	
NAME			5.2 NAM.	E					
STREET ADDRESS			5.3 STRE	ET ADO	RESS				
CITY-ST-ZIP		FT bb by	5.4 CITY		P				
THLE		☐ DELETE	6. 1 TITLE				Chang	e 🛅 Addition	
NAME			6.2 NAMI						
STREET ADDRESS			6.3 \$1RE	ET AD:	RESS				
CITY-S1-ZIP	cortify that the information are all all	(All Alujo Cino to 111 24 2 4 4	6.4 CITY	ST-21	<u>Р</u>				
certify that oath; that I appears in	the information indicated on the annual manufacture and an efficient of the corporation and an efficient of the corporation of	with this hing is voluntarily turns all report or supplemental annu vation of the receiver or trusted a suputtachment with an addra	sned and do laf report is t entipowered ess.	ies no rue a i to e	or qualify ind accur execute th	for the exemption stated in Section 119.0 rate and that my signature shall have the sails report as required by Chapter 607, Flori	(3)(k), Florida Sta ame legal effect a da Statutes; and		

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE: