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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

	1996	6 DIVISION OF CORPORATIONS		RATIONS				
	MENT #	L92267	(8)					
1. Corporatio		OF FLORIDA, IN	` '					
Principal Place	e of Business	 Ma	Ing Address			I HADINAN ANA HAKKE NAKUP NAKA I		
P. O. BOX 810775 BOCA RATON FL 33481 US			P. O. BOX 810775 BOCA RATON FL 3 US	3481				
			-			3. Date Incorporated or Qualified 08/06/1990	3a. Date o	6/09/1995
	lace of Business		Mailing Address			4. FEI Number 65-0202507	1	Applied For
1] Suite, Apt	#, etc.	26	Suite, Apt. #, etc			05/0202007		Not Applicable
	· · · · · · · · · · · · · · · · ·	27	Bone, Apr. #, etc			5. Certificate of Status Desired		\$8.75 Additional Fee Required
City & State	e · · · · · · · · · · · · · · · · · ·	28	Orty & State			Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees
Zip ∎I	25 Cour	F-1	Zip	h	intry	8. This corporation has liability for		
4		29 29 ress of Current Register	red Agent	30			□No	
					81 Name	10. Name and Address of New F	egistered Ag	ent
	PACKER, MARY A 4225 N.W. 24TH TERRACE				82 Street Add	ress (P.O. Box Number is Not Acceptab	ulo)	
	n.w. 24171 TERRAU . RATON FL 33431	/E				ITESS II .O. DOX NOTIDEL IS NOT ACCEPTAL	iie)	
D 00/(11411011112 00401				63			
					84 City		P	85 Zip Code
11. Pursuant t	to the provisions of Sec	ctions 607.0502 and 607.	1508, Florida Statute	es, the abo	ve-named corpo	ration submits this statement for the sur	FL	
familiar wit	th, and accept the obliq	gations of, Section 607.05	i05, Florida Statutes	ea by the c	corporation's boa	oration submits this statement for the pur ard of directors. I hereby accept the appe	ointment as reg	jistered ägent. I am
SIGNATURE	Signature, typed or production or	ic of regels ad agent and litte if app	matik (NO	The Registered	Agent signature require	ad when reinstatropi	DATE	
2.	ı u	OFFICERS AND DIRECT	ORS	13.		ADDITIONS/CHANGES TO OFF		RECTORS IN 12
HLF AME	PACKER, MAR	Y A	DELETE	1 11	ĺ			RECTORS IN 12 Change Addition
BEET ADDRESS	4225 N.W. 241			1.2 NA				j
Tr-S1 ZiP	BOCA RATON			- 1	REET ADDRESS			
117	ν		DELETE	1.4 CI 2 1 TI	TY - ST - ZIP			
AME	KANEFSKY, M			2 2 NA				Change 🔲 Addition 📙
DELET ADDRESS	4225 N.W. 241				ME I		L., '	, ,
177.51-719	BOCA RATON	FL 33431		23 ST	ME REET ADDRESS		L. ,	
TLF							L.,	
			DELETE		REET ADDRESS IY-ST-ZIP			Change Addition
			☐ DELETE	2401	REET ADDRESS (Y-ST-ZIP TLE			
PREFEADERESS			☐ DELETE	24 C1 3 1 TH 32 NA 33 ST	REET ADDRESS IY-ST-ZIP ILE ME REET ADDRESS			
R: FT ADORESS TY - ST - Z#				24 C 1 3 1 T 1 3 2 NA 3 3 S 1 3 4 C 1	REET ADDRESS IY-ST-ZIP ILE ME REET ADDRESS Y-ST-ZIP			Change Addition
REFLADORESS TY-SL-ZIF LEF			□ DEFELE	24 Cri 3 1 Tr 32 NA 33 ST 34 Cri 4 1 Tr	REFT ADDRESS IY-ST-ZIP ILE ME REFT ADDRESS Y-ST-ZIP ILE			
REFLADORESS TY-SI-ZIF LEF				24 C1 3 1 TI 32 NA 33 S1 34 C1 4 1 TI 4.2 NA	REFT ADDRESS IY-ST-ZIP ILE ME REFT ADDRESS Y-ST-ZIP ILE ME			Change Addition
REFLADDRESS TY-SL-ZIF LEF MME SRELADDRESS				24 Cri 3 1 Tl 32 NA 33 ST 34 Cri 4 1 Tl 42 NA 4.3 SH	REET ADDRESS IY-ST-ZIP TLE ME REET ADDRESS IY-ST-ZIP TLE ME ME REET ADDRESS			Change Addition
R: FLACCRESS DY - SL-ZIE L: F MIE NE: LADDRESS D- SL-ZIP				24 Cri 3 1 Tl 32 NA 33 ST 34 Cri 4 1 Tl 42 NA 4.3 SH	REFT ADDRESS IY-ST-ZIP TLE ME REFT ADDRESS IY-ST-ZIP ILE ME REFT ADDRESS Y-ST-ZIP ILE ME REFT ADDRESS Y-ST-ZIP			Change Addition
B: FT ADDRESS TY - ST- ZIF U. F MME SE: T ADDRESS TY - ST- ZIF			□] DELETE	24 Ct 3 1 Tt 32 MA 33 ST 34 Ct 4 1 Tt 42 NA 43 SM 44 Ct	REFT ADDRESS IY-ST-ZIP TLE ME REFT ADDRESS IY-ST-ZIP TLE ME ME REFT ADDRESS Y-ST-ZIP TLE ME REFT ADDRESS Y-ST-ZIP			Change Addition
RELEADURESS TY-SI-SIE LL-FE MME SELEADURESS TY-SIE LP MME HELEADURESS HELEADURESS HELEADURESS			□] DELETE	24 CI 3 1 TI 32 MA 33 SI 34 CH 4 1 TI 42 NA 43 SH 44 CH 5 1 TH	REFT ADDRESS IY-ST-ZIP TLE ME REFT ADDRESS IY-ST-ZIP TLE ME ME REFT ADDRESS Y-ST-ZIP TLE ME REFT ADDRESS Y-ST-ZIP			Change Addition
RELEADURESS TY-SI-ZIF LLF MME SRELADURESS TY-SI-ZIF MME FEELADURESS TY-SI-ZIF TY-ZIF T			DETELE	2 4 Cri 3 1 Ti 32 MA 33 SI 34 Cri 4 1 Ti 42 NA 43 SI 44 Cri 5 1 Till 52 NAI 53 SI	REFT ADDRESS IY-ST-ZIP TLE ME REFT ADDRESS IY-ST-ZIP TLE ME ME AGET ADDRESS Y-ST-ZIP TLE ME			Change Addition
IRCH ADDRESS TY-SI-ZIF LLF SR: LADDRESS TO ST-ZIF LLF MME BEET ADDRESS TY-SI-ZIF LLF LLF LLF LLF LLF LLF LLF L			□] DELETE	2 4 Cri 3 1 Ti 32 MA 33 SI 34 Cri 4 1 Ti 42 NA 43 SI 44 Cri 5 1 Till 52 NAI 53 SI	REET ADDRESS IY-ST-ZIP TLE ME REET ADDRESS Y-ST-ZIP TLE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-ST-ZIP			Change Addition
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AMA BE FLACAESS ITY-SL-ZB LEF AMB BB : LADDRESS TO SL-ZB BB : LADDRESS TY-SL-ZB BC : LADDRESS TY-SL-ZB			DETELE	2 4 Cri 3 1 Ti 3 2 MA 33 SI 34 Cri 4 1 Ti 4 2 NA 4 4 Cri 5 1 Tri 5 2 NAI 5 3 SIF 5 4 Cri 6 1 Tri 6 2 MAI 6 3 STF	REET ADDRESS IY-ST-ZIP TLE ME REET AUDRESS Y-S1-ZIP TLE ME REET ADDRESS Y-S1-ZIP LE ME REET ADDRESS Y-S1-ZIP LE ME REET ADDRESS Y-S1-ZIP LE ME REET ADDRESS			Change Addition Change Addition Change Addition

certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under cath; that I am an officer or director of the corporation or the receiver or trustee enipowered 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.

SIGNATURE: