FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

22	of Last Report 01/1995 Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be Added to Fees under s 199.032,
1881 N E 26TH ST SUITE 201 1881 N E 26TH ST SUITE 201 WILTON MANORS FL 33305 3. Date incorporated or Qualified 02/22/1985 05/22/1985 0	O1/1995 Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be Added to Fees under s 199.032, gent
2. Principal Place of Business 2. A Mailing Address 2. Mailing Address 2. A FEI Number 3. Suite, Apt. #, etc. 3. Suite, Apt. #, etc. 3. City & State 4. FEI Number 59-2530199 Suite, Apt. #, etc. 5. Certificate of Status Desired City & State City & State 2. Country 2. A Tip Country 3. Tip Country 3. This corporation has liability for intangible tax 4. FEI Number 59-2530199 Suite, Apt. #, etc. 5. Certificate of Status Desired Trust Fund Contribution Trust Fund Contribution Trust Fund Contribution Description of the International Statutes (P.O. Box Number is Not Acceptable) ANDERSON, E.J. 1881 N.E. 26TH STREET, SUITE 201 WILTON MANORS FL 33305 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) FL. 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of channor or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as reference agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as reference agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as reference accepts the appointment as referenc	O1/1995 Applied For Not Applicable \$8.75 Additional Fee Required \$5.00 May Be Added to Fees under s 199.032, gent
Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State City & State Country Zip Country Xix Yes No Name and Address of Current Registered Agent Name ANDERSON, E.J. 1881 N.E. 26TH STREET, SUITE 201 WILTON MANORS FL 33305 WILTON MANORS FL 33305 Registered Agent Ti. Pursuant to the provisions of Soctions 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changor registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as re	\$8.75 Additional Fee Required \$5.00 May Be Added to Fees under s 199.032,
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City & State City & State Country Zip Country Registered Agent Street Address (P.O. Box Number is Not Acceptable)	Fee Required \$5.00 May Be Added to Fees under s 199.032, gent
Trust Fund Contribution Zip Country B. This corporation has liability for intangible tax Florida Statutes XX Yes No Phorida Statutes XX Yes No Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) Zig Street Address (P.O. Box Number is Not Acceptable) Zig Street Address (P.O. Box Number is Not Acceptable) Zig Street Address (P.O. Box Number is Not Acceptable) Zig Street Address (P.O. Box Number is Not Acceptable) Zig Street Address (P.O. Box Number is Not Acceptable) Zig Street Address (P.O. Box Number is Not Acceptable) Zig Street Address (P.O. Box Number is Not Acceptable) Zig Street Address (P.O. Box Number is Not Acceptable) Zig Street Address (P.O. Box Number is Not Acceptable) Zig Street Address (P.O. Box Number is Not Acceptable) Zig Street Address (P.O. Box Number is Not Acceptable) Zig Street Address (P.O. Box Number is Not Acceptable) Zig Street Address (P.O. Box Number is Not Acceptable) Zig Street Address (P.O. Box Number is Not Acceptable) Zig Street Address (P.O. Box Number is Not Acceptable) Zig Street Address (P.O. Box Number is Not Acceptable) Zig Street Address (P.O. Box Number is Not Acceptable)	Added to Fees under s 199.032, gent
Zip Country 7ip Country 7ip Country 8. This corporation has liability for intangible tax Florida Statutes XX Yes \ No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent ANDERSON, E.J. 1881 N.E. 26TH STREET, SUITE 201 WILTON MANORS FL 33305 81 City FL 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of change or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as re	under s 199.032, gent
9. Name and Address of Current Registered Agent 81 Name ANDERSON, E.J. 1881 N.E. 26TH STREET, SUITE 201 WILTON MANORS FL 33305 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 84 City FL 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of chain or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as re	
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	egistered agent. I am
SIGNATURE	
Signature, typod or printed name of registered agon; and the if applicable (NOTE: Registered Agent signature required with refristating) DATE	
12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 1.1 TITLE	DIRECTORS IN 12 Change
NAME ANDERSON, E.J. 1.2 NAME	
STREET ADDRESS 1881 N.E 26TH ST STE 201 1.3 STREET ADDRESS	
CITY-ST-7/P WILTON MANORS FL 1.4 CITY-ST-7/P	
	Change
NAME GULDSTRAND, INGVAR 22 NAME STREET ADDRESS 3430 GALT OCEAN DR 2.3 STREET ADDRESS	
STREET ADDRESS CHY-ST-ZIP FT LAUDERDALE FL 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	
	Change Addition
NAME 3.2 NAME	_
STREET ADDRESS 3.3 STREET ADDRESS	
CITY-S1-7/P 3.4 CITY-S1-7/P	<u>-</u>
	Change Addition
NAME 42 NAME STREET ADDRESS 4.3 STREET ADDRESS	
\$1.3 STREET ADDRESS	
	Change [] Addition
NAME 5.2 NAME	
STREET ADDRESS 5.3 STREET ADDRESS	
C(TY-ST-7)P 5.4 C(TY-ST-7)P	
_	Change Addition
NAME 62 NAME	
STREET ADDRESS 6.3 STREET ADDRESS CHOLIN CT. 710	-
CITY-ST-ZIP 6.4 CITY-ST-ZIP 6.4 CITY-ST-ZIP 6.4 CITY-ST-ZIP 6.4 CITY-ST-ZIP 7.1 I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Floric 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 effective.	

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.

SIGNATURE:

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