FILE NO	DW: FILING	FEE AFTER	MAY 1	IS \$225.00
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PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE

	IUAL REPORT Secretary of State, 1996 DIVISION OF CORPORATIONS		is							
	MENT #	M72447	(9)			·				
,		ANAGEMENT CO	RP							
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Principal Place of Business			Maling Address				***************	4.9 6.6	B1411 41411 1891	
8853 SW 18TH ST. Suite M-110 Boca Raton FL 33433			200 E. LAS OLAS BLVD SUITE 100 FT. LAUDERDALE FL 33301							
		I	JS				3. Date incorporated or Qualified 03/17/1988		of Last R 5/01/19:	
2. Principal Pla	ace of Business	2a.	Mailing Address				4. FEI Number			Applied For
21		26	26		65-0097359			Not Applicable		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		5. Certificate of Status Desired \$8.75			Additional		
Orty & State	22		Ctr. 9 Stole		Fee Re			Required		
23	7	28	City & State				Election Campaign Financing Trust Fund Contribution			O May Be of to Fees
Zip	Cour		Ζιρ	Coun	try	···-	This corporation has liability for it.	ntangible ta		
24	25	29					Florida Statutes Yes No			
	9. Name and Add	ress of Current Regis	ered Agent		31	·	10. Name and Address of New R	egistered	Agent	
EDANKE	L, FRED ~			Ľ		Vante				
	V 18TH ST.			8	32 3	Street Add	ress (P.O. Box Number is Not Acceptab	le)		
SUITE M				8	33					
	iaton fl 33433			<u> </u>		<u> </u>			1: 1 =	
						City		FL	1 1 '	p Code
SIGNATURE ,		e of regularish ager than the of a	, picable (NO				ration submits this statement for the pur rel of directors. Thereby accept the appoint of change straig	OATE		
12.	PO	OFFICERS AND DIREC	TORS DELETE	13.			ADDITIONS/CHANGES TO OFFI			
NAME	FRANKEL, FREE)			1 1 TITLE 12 NAME			L	Change	Addition
STREET ADDRESS	6853 SW 18TH			1.3 STRE		DRESS				
CHTY-ST-ZIP	BOCA RATON F	i.		14001						
TITLE	STD		☐ DELETE	2 1 7:11					Change	Addition
NAME	FRANKEL, HENI			2 2 NAM	15		4			
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TITLE			DELETE	4 1 1111				Ĺ] Change	Addition
NAME				4.2 NAM	1 E					
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CITY-ST-ZIP				5 4 CITY			<i>ᡯᡯᡯ᠘</i> ᠐᠘。᠐᠘	/	15	16
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NAME				62 NAM	1Ł				inn	_
STREET ADDRESS				635188	CA : 1	DRESS			1 /	_
CITY-S1-ZIF	continue that the later	estino o reello de de la la	the level at 1.5	6.4 City	S1 - Z	is I			_ ر	
reduly that	y ceruiry that the INTOTH The information indical	ianon supplied with this : lad on this sonus; record	one involvemental con-	ished and do	005 f	ot quality f	or the exemption stated in Section 119.0	17(3,(k), Floi	ida Statut	es. I further

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 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 changes, 30 on an attachment with an address.

SIGNATURE:
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
FRED FRANKEL

4-16-46 (954) 761-9797

CR2E034 (12/95)