COF ANNI	PROFIT RPORATION UAL REPORT <b>1996</b>		Sandra Secreta	RTMENT OF STAT B. Mortham ary of State CORPORATIONS	Έ.					
Corporatio	MENT # M90 n Name IP, INC:	6006	(5)							
ncipal Place	e of Business	Mailin	g Address							
	HERSKOWITZ 22ND ST #212 3176	678	JACK L. HERSKOWT 10 S.W. 92ND ST., # MII FL 33176			3. Date Incorporated or C	Qualified	3a. Date of La	,	
Principal Pl	ace of Business	2a. Ma	ailing Address			08/22/1988 4. FEI Number		02/10	/1995 Applie	d For
Suite, Apt.	#, etc.	26 Su	ilte, Apt. #, etc.			65-0070042				pplicable
		27				5. Certificate of Status De	esired		.75 Add ee Requi	
Dity & State	e	28	ty & State		T	6. Election Campaign Fina Trust Fund Contribution			5.00 Ma	
<b>7</b> ip	Country 25	Zip	>	Country		8. This corporation has lia	bility for int	angible tax und		
	9. Name and Address of t	29 Current Registere	d Agent	30		Florida Statutes 10. Name and Address of	Ves			
	.W. 92ND ST., #212 FL 33176			83	901 Address	s (P.O. Box Number is Not )				
MIAMI F Pursuant t or register familiar wit		7.0502 and 607.15 of Florida. Such cha 1, Section 607.050	08, Florida Statutes ange was authorized 5, Florida Statutes.	<b>84</b> City				FL 85 se of changing tment as registe	Zip Cod Its registe ered agen	
MIAMI F Pursuant t or register familiar wit	FL 33176 to the provisions of Sections 60 ed agent, or both, in the State of th, and accept the obligations o	red agent and title if applica	able. (NOTE	84 City s, the above-named d by the corporatio	d corporation's board of	on submits this statement fo of directors. I hereby accept remensions)	or the purpo the appoin	DATE	its registe pred agen	red office t. I am
Pursuant t or register familiar wit	FL 33176 to the provisions of Sections 60 ed agent, or both, in the State of th, and accept the obligations o	, Occion 001.000.	able. (NOTE	84 City , the above-named d by the corporatio	d corporation's board of	on submits this statement fo of directors. I hereby accept	or the purpo the appoin	DATE	its registe ared agent	red office t. I am
MIAMI F	FL 33176 to the provisions of Sections 60 ed agent, or both, in the State of th, and accept the obligations o Standure typed or printed name of register OFFICEF D HERSKOWITZ, ALLAN 1	ed agent and tile if applice RS AND DIRECTOF	able. (NOTE	84 City s, the above-named d by the corporatio : Registered Agent signet 13. 1.1 TITLE 1.2 NAME	d corporatic n's board c	on submits this statement fo of directors. I hereby accept remensions)	or the purpo the appoin	DATE	its registe ared agent	red office t. I am
MIAMI F Pursuant t or register amiliar wit IATURE	FL 33176 to the provisions of Sections 60 ed agent, or both, in the State of th, and accept the obligations o Standure typed or printed name of register OFFICEF D HERSKOWITZ, ALLAN I 8780 S.W. 92ND ST. #	ed agent and tile if applice RS AND DIRECTOF	able. (NOTE	84 City 3, the above-named d by the corporatio E Registered Agent signet 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRE	d corporatic n's board c	on submits this statement fo of directors. I hereby accept remensions)	or the purpo the appoin	DATE	its registe ared agent	red office t. I am
MIAMI F Pursuant t for register familiar wit IATURE:	FL 33176 In the provisions of Sections 60 ad agent, or both, in the State of th, and accept the obligations o Signature typed or printed name of register OFFICEF D HERSKOWITZ, ALLAN I 8780 S.W. 92ND ST. # MIAMI FL D	ed agent and tele if applica RS AND DIRECTOF M.D. 212	able. (NOTE	84 City s, the above-named d by the corporatio : Registered Agent signet 13. 1.1 TITLE 1.2 NAME	d corporatic n's board c	on submits this statement fo of directors. I hereby accept remensions)	or the purpo the appoin	DATE	Its registe ered agen CTORS IN nge	red office t. I am
MIAMI F Pursuant t or register familiar wit NATURE TADDRESS S1-2IP	FL 33176 to the provisions of Sections 60 ed agent, or both. In the State of th, and accept the obligations of Signature typed or printed name of register OFFICEF D HERSKOWITZ, ALLAN I 8780 S.W. 92ND ST. # MIAMI FL D FISCHER, KENNETH M	ed agent and title if applica RS AND DIRECTOF M.D. 212	able (NOTE RS DELETE	84 City 3, the above-named d by the corporatio E Registered Agent signet 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRE 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME	d corporatic n's board o re recurred wh	on submits this statement fo of directors. I hereby accept remensions)	or the purpo the appoin	EL     ise of changing     trment as registe     DATE     ERS AND DIRE     Char	Its registe ered agen CTORS IN nge	red office t. I am I 12 Addition
MIAMI F Pursuant t or registerer familiar wit NATURE TADORESS S1-2IP	FL 33176 In the provisions of Sections 60 ad agent, or both, in the State of th, and accept the obligations o Signature typed or printed name of register OFFICEF D HERSKOWITZ, ALLAN I 8780 S.W. 92ND ST. # MIAMI FL D	ed agent and title if applica RS AND DIRECTOF M.D. 212	able (NOTE RS DELETE	84 City 5, the above-named d by the corporatio E Registered Agent signet 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRE 1.4 CITY-ST-ZIP 2.1 TITLE	d corporatic n's board o re recurred wh	on submits this statement fo of directors. I hereby accept remensions)	or the purpo the appoin	EL     ise of changing     trment as registe     DATE     ERS AND DIRE     Char	Its registe ered agen CTORS IN nge	red office t. I am I 12 Addition
MIAMI F Pursuant t or registerer familiar wit IATURE TADORESS S1-2IP	FL 33176 To the provisions of Sections 60 ed agent, or both. In the State of th, and accept the obligations of Signature typed or printed name of register OFFICEF D HERSKOWITZ, ALLAN I 8780 S.W. 92ND ST. # MIAMI FL D FISCHER, KENNETH M 8780 S.W. 92ND ST. # MIAMI FL D	ed agent and title if applica RS AND DIRECTOF M.D. 212 .D. 212	able (NOTE RS DELETE	84     City       s, the above-named     d by the corporatio       1     1       2     1       1     1       2     1       1     1       2     1       1     1       2     1       1     1       2     1       2     3       1     1       2     1       1     1       2     3       2     1       2     1       1     1       1     1       1     1       1     1       1     1       1     1       1	d corporatic n's board o re recurred wh	on submits this statement fo of directors. I hereby accept remensions)	or the purpo the appoin	EL     ise of changing     trment as registe     DATE     ERS AND DIRE     Char	its registe ared agen CTORS IN Ige	red office t. I am I 12 Addition
MIAMI F Pursuant t or register familiar wit IATURE TADORESS ST- ZIP FADDRESS ST- ZIP	FL 33176 To the provisions of Sections 60 ed agent, or both. In the State of th, and accept the obligations of Standure typed or printed name of register OFFICEF D HERSKOWITZ, ALLAN II 8780 S.W. 92ND ST. # MIAMI FL D FISCHER, KENNETH M 8780 S.W. 92ND ST. # MIAMI FL D ABEL, MARSHALL M.D. 8780 S.W. 92ND ST. #	ed agent and title if applica RS AND DIRECTOF M.D. 212 .D. 212	able (NOTE RS DELETE	84 City 3, the above-named d by the corporatio E Registered Agent signet 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRE: 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRE: 2.4 CITY-ST-ZIP	d corporatic n's board o re required wh	on submits this statement fo of directors. I hereby accept remensions)	or the purpo the appoin	DATE	its registe ared agen CTORS IN Ige	red office 1. I arr 1. 12 Addition Addition
MIAMI F Pursuant t or register familiar wit VATURE T ADORESS ST- ZIP F ADDRESS ST- ZIP F ADDRESS	FL 33176 To the provisions of Sections 60 ed agent, or both. In the State of th, and accept the obligations of Segnature typed or printed name of register OFFICEF D HERSKOWITZ, ALLAN I 8780 S.W. 92ND ST. # MIAMI FL D FISCHER, KENNETH M 8780 S.W. 92ND ST. # MIAMI FL D ABEL, MARSHALL M.D.	ed agent and title if applica RS AND DIRECTOF M.D. 212 .D. 212	BY HONGE STATUTES.	84         City           s, the above-named         d by the corporatio           1         1         file           1.1         TILE         1.2           1.3         STREET ADDRE         1.3           1.4         CITY-ST-ZIP         2           2.1         TITLE         2.3           2.3         STREET ADDRE         2.3           2.4         CITY-ST-ZIP         3.1           3.1         TITLE         3.2           3.3         STREET ADDRE         3.3           3.4         CITY-ST-ZIP         3.1	d corporatic n's board o re required wh	on submits this statement fo of directors. I hereby accept remensions)	or the purpo the appoin	DATE ERS AND DIREC Char Char	its registe are d agen CTORS IN 1ge	red office 1. I am 1. 12 Addition Addition
MIAMI F Pursuant t or register familiar wit VATURE T ADDRESS S1- ZIP T ADDRESS S1- ZIP	FL 33176 To the provisions of Sections 60 ed agent, or both. In the State of th. and accept the obligations of Standure typed or printed name of register OFFICEF D HERSKOWITZ, ALLAN I 8780 S.W. 92ND ST. # MIAMI FL D ABEL, MARSHALL M.D. 8780 S.W. 92ND ST. # MIAMI FL D ABEL, MARSHALL M.D. 8780 S.W. 92ND ST. # MIAMI FL D GRAN, BERNARD, M.D.	ed agent and tale if applica RS AND DIRECTOF M.D. 212 D. 212	able (NOTE RS DELETE	84     Orty       s, the above-named       d by the corporatio       13.       1.1 TITLE       1.2 NAME       1.3 STREET ADDRE       1.4 CITY-ST-ZIP       2.1 TITLE       2.2 NAME       2.3 STREET ADDRE       2.4 CITY-ST-ZIP       3.1 TITLE       3.2 NAME       3.3 STREET ADDRE	d corporatic n's board o re required wh	on submits this statement fo of directors. I hereby accept remensions)	or the purpo the appoin	DATE	its registe are d agen CTORS IN 1ge	red office t. I arr I 12 Addition
MIAMI F Pursuant t or register familiar wit VATURE T ADDRESS S1- 2IP T ADDRESS S1- 2IP T ADDRESS S1- 2IP T ADDRESS	FL 33176 To the provisions of Sections 60 ed agent, or both. In the State of th, and accept the obligations of Standure typed or printed name of register OFFICEF D HERSKOWITZ, ALLAN I 8780 S.W. 92ND ST. # MIAMI FL D ABEL, MARSHALL M.D. 8780 S.W. 92ND ST. # MIAMI FL D ABEL, MARSHALL M.D. 8780 S.W. 92ND ST. # MIAMI FL D GRAN, BERNARD, M.D. 8780 S.W. 92ND ST. #	ed agent and tale if applica RS AND DIRECTOF M.D. 212 D. 212	BY HONGE STATUTES.	84     City       s, the above-named     13       E: Bogistered Agent signet     13       1.1 TITLE     1.2 NAME       1.3 STREET ADDRE     14 CITY - ST - ZIP       2.1 TITLE     2.2 NAME       2.3 STREET ADDRE       3.1 TITLE       3.2 NAME       3.3 STREET ADDRE       3.4 CITY - ST - ZIP       4.1 TITLE       3.2 NAME       3.3 STREET ADDRE       3.4 CITY - ST - ZIP       4.1 TITLE       3.3 STREET ADDRE       3.4 CITY - ST - ZIP       4.1 TITLE       4.3 STREET ADDRES	d corporations board of the second se	on submits this statement fo of directors. I hereby accept remensions)	or the purpo the appoin	DATE ERS AND DIREC Char Char	its registe are d agen CTORS IN 1ge	red office 1. I am 1. 12 Addition Addition
MIAMI F Pursuant t or register familiar wit VATURE T ADDRESS S1- 2IP T ADDRESS S1- 2IP T ADDRESS S1- 2IP T ADDRESS	FL 33176 To the provisions of Sections 60 ed agent, or both. In the State of th. and accept the obligations of Standure typed or printed name of register OFFICEF D HERSKOWITZ, ALLAN I 8780 S.W. 92ND ST. # MIAMI FL D ABEL, MARSHALL M.D. 8780 S.W. 92ND ST. # MIAMI FL D ABEL, MARSHALL M.D. 8780 S.W. 92ND ST. # MIAMI FL D GRAN, BERNARD, M.D.	ed agent and tale if applica RS AND DIRECTOF M.D. 212 D. 212	BY HONGE STATUTES.	84     City       s, the above-named       d by the corporatio       13.       1.1 TITLE       1.2 NAME       1.3 STREET ADDRE       1.4 CITY-ST-ZIP       2.1 TITLE       2.2 NAME       2.3 STREET ADDRE       2.4 CITY-ST-ZIP       3.1 TITLE       3.2 NAME       3.3 STREET ADDRE       3.4 CITY-ST-ZIP       4.1 TITLE       4.2 NAME	d corporations board of the second se	on submits this statement fo of directors. I hereby accept remensions)	or the purpo the appoin	ERS AND DIREC	Its registe are J agen CTORS IN 192	red office 1. I am 1. 12 Addition Addition
MIAMI F Pursuant t or register familiar wit VATURE T ADDRESS S1-2IP T ADDRESS S1-2IP T ADDRESS S1-2IP T ADDRESS S1-2IP T ADDRESS S1-2IP	FL 33176	ed agent and tale if appire RS AND DIRECTOF M.D. 212 2.D. 212 212 212 212 212 212	DELETE	84       City         s, the above-named       13;         1.1 TITLE       12 NAME         1.3 STREET ADDRE       14 CITY - ST - ZIP         2.1 TITLE       22 NAME         2.3 STREET ADDRE       24 CITY - ST - ZIP         3.1 TITLE       3.2 NAME         3.3 STREET ADDRE       3.4 CITY - ST - ZIP         3.1 TITLE       3.2 NAME         3.3 STREET ADDRE       3.4 CITY - ST - ZIP         4.1 TITLE       4.2 NAME         4.3 STREET ADDRES       4.4 CITY - ST - ZIP         5.1 TITLE       5.2 NAME	d corporations in the second of the second o	on submits this statement fo of directors. I hereby accept remensions)	or the purpo the appoin	JATE Chare Chare Chare Char Char Char	Its registe are J agen CTORS IN 192	red office 1. I am I 12 Addition Addition
MIAMI F Pursuant t or register familiar wit VATURE T ADDRESS S1-2IP T ADDRESS S1-2IP T ADDRESS S1-2IP T ADDRESS S1-2IP	FL 33176 To the provisions of Sections 60 ed agent, or both. In the State of th, and accept the obligations of OFFICEF D HERSKOWITZ, ALLAN I 8780 S.W. 92ND ST. # MIAMI FL D ABEL, MARSHALL M.D. 8780 S.W. 92ND ST. # MIAMI FL D GRAN, BERNARD, M.D. 8780 S.W. 92ND ST. # MIAMI FL D GRAN, BERNARD, M.D. 8780 S.W. 92ND ST. # MIAMI FL D GRAN, BERNARD, M.D. 8780 S.W. 92ND ST. # MIAMI FL D MARTINEZ, GUILLERMC 8780 S.W. 92ND ST. #	ed agent and tale if appire RS AND DIRECTOF M.D. 212 2.D. 212 212 212 212 212 212	DELETE	84       City         s, the above-named       10         by the corporatio       11         12       13         1.1 TITLE       12         1.2 NAME       1.3 STREET ADDRE         1.4 CITY - ST - ZIP       2         2.1 TITLE       2         2.3 STREET ADDRE       2.4 CITY - ST - ZIP         3.1 TITLE       3.2 NAME         3.3 STREET ADDRE       3.4 CITY - ST - ZIP         4.1 TITLE       4.2 NAME         4.3 STREET ADDRES       4.4 CITY - ST - ZIP         5.1 TITLE       5.2 NAME         5.3 STREET ADDRES       5.3 STREET ADDRES	d corporations in the second of the second o	on submits this statement fo of directors. I hereby accept remensions)	or the purpo the appoin	JATE Chare Chare Chare Char Char Char	Its registe are J agen CTORS IN 192	red office 1. I am I 12 Addition Addition
MIAMI F Pursuant t or register familiar wit NATURE	FL 33176	ed agent and tale if appire RS AND DIRECTOF M.D. 212 2.D. 212 212 212 212 212 212	DELETE	84       City         s, the above-named       13;         1.1 TITLE       12 NAME         1.3 STREET ADDRE       14 CITY - ST - ZIP         2.1 TITLE       22 NAME         2.3 STREET ADDRE       24 CITY - ST - ZIP         3.1 TITLE       3.2 NAME         3.3 STREET ADDRE       3.4 CITY - ST - ZIP         3.1 TITLE       3.2 NAME         3.3 STREET ADDRE       3.4 CITY - ST - ZIP         4.1 TITLE       4.2 NAME         4.3 STREET ADDRES       4.4 CITY - ST - ZIP         5.1 TITLE       5.2 NAME	d corporations in the second of the second o	on submits this statement fo of directors. I hereby accept remensions)	or the purpo the appoin	JATE Chare Chare Chare Char Char Char	Its registe ered agen CTORS IN 192	red office 1. I am I 12 Addition Addition
MIAMI F Pursuant t or register familiar wit NATURE T ADDRESS S1-2IP F ADDRESS S1-2IP F ADDRESS S1-2IP T ADDRESS S1-2IP T ADDRESS S1-2IP	FL 33176 To the provisions of Sections 60 ed agent, or both. In the State of th, and accept the obligations of OFFICEF D HERSKOWITZ, ALLAN I 8780 S.W. 92ND ST. # MIAMI FL D ABEL, MARSHALL M.D. 8780 S.W. 92ND ST. # MIAMI FL D GRAN, BERNARD, M.D. 8780 S.W. 92ND ST. # MIAMI FL D GRAN, BERNARD, M.D. 8780 S.W. 92ND ST. # MIAMI FL D GRAN, BERNARD, M.D. 8780 S.W. 92ND ST. # MIAMI FL D MARTINEZ, GUILLERMC 8780 S.W. 92ND ST. #	ed agent and tale if appire RS AND DIRECTOF M.D. 212 2.D. 212 212 212 212 212 212	DELETE	84     City       s, the above-named       by the corporatio       1       2       2       1       1       2       3       4       4       4       4       4       4       4       4       5       5       5       4       1       1       <	d corporation's board of several of the several of	on submits this statement fo of directors. I hereby accept remensions)	or the purpo the appoin		Its registe ered agen CTORS IN 192	red office 1. I am <u>I 12</u> Addition Addition Addition
MIAMI F Pursuant t or register familiar wit NATURE T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP	FL 33176 To the provisions of Sections 60 ed agent, or both. In the State of th, and accept the obligations of OFFICEF D HERSKOWITZ, ALLAN I 8780 S.W. 92ND ST. # MIAMI FL D ABEL, MARSHALL M.D. 8780 S.W. 92ND ST. # MIAMI FL D GRAN, BERNARD, M.D. 8780 S.W. 92ND ST. # MIAMI FL D GRAN, BERNARD, M.D. 8780 S.W. 92ND ST. # MIAMI FL D GRAN, BERNARD, M.D. 8780 S.W. 92ND ST. # MIAMI FL D MARTINEZ, GUILLERMC 8780 S.W. 92ND ST. #	ed agent and tale if appires RS AND DIRECTOF M.D. 212 2.D. 212 212 212 212 212 212 212 212 212		84       City         5, the above-named       by the corporatio         1       1         13.       1.1         1.1       TITLE         1.2       NAME         1.3       STREET ADDRE         1.4       CITY-ST-ZIP         2.1       TITLE         2.3       STREET ADDRE         2.4       CITY-ST-ZIP         3.1       TITLE         3.2       NAME         3.3       STREET ADDRE         3.4       CITY-ST-ZIP         4.1       TITLE         4.2       NAME         4.3       STREET ADDRE         3.4       CITY-ST-ZIP         4.1       TITLE         5.2       NAME         4.3       STREET ADDRES         4.4       CITY-ST-ZIP         5.1       TITLE         5.2       NAME         5.3       STREET ADDRES         5.4       CITY-ST-ZIP         6.1       TITLE         6.2       NAME         6.3       STREET ADDRES         6.4       CITY-ST-ZIP         6.1       TITLE         6.3       STR	d corporations in the second of the second o	on submits this statement fo of directors. I hereby accept enreinstating) ADDITIONS/CHANGES	TO OFFIC	JATE Char Char Char Char Char	Its registe ared agen CTORS IN 192	red office t. I am I 12 Addition Addition Addition Addition