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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

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Principal Plac	ce of Business	Mailing Address		. ,	E TREATHER BIR TIDES BISET IN 1988 ONLY	. INDE BIBIT OLDIL BIBIT BIBI	1 81811 6 5851 1 0 85
P O BOX 9588 FT. LAUDERDALE FL 33310-6588		P O BOX 9588 FT. LAUDERDALE FL 33310-6588					
					3. Date Incorporated or Qualified 03/01/1988	3a. Date of Las 04/21/1	
Principal Place of Business		2a. Mailing Address 26		4. FEI Number 65-0190502		Applied For	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	1 1	Not Applicable 5 Additional	
City & State		City & State		Election Campaign Financing	\$5.0	Required 00 May Be	
Zip	Country	28	Country	·	Trust Fund Contribution	Adde	ed to Fees
4	25	29	30		This corporation has liability for in Florida Statutes	ntangible tax under s ☐ Yes ☐ No	. 199.032,
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Re		
CITTED	CENE		81	Name			
Sitter, gene 2526 W. Oakland Park Blvd. Ft. Lauderdale Fl 33311			82	Street Add	iress (P.O. Box Number is Not Acceptable	9)	
			83				
			84	City			
				Ony			p Code
44 5							
 Pursuant or registe 	to the provisions of Sections 617,050; red agent, or both, in the State of Fior	2 and 617,1508, Florida Statu ida. Such change was authori	tes, the above na zed by the corpo	amed corpo	pration submits this statement for the purpard of directors. Thereby accept the appoint	oose of changing its	registered office
	to the provisions of Sections 617.050; red agent, or both, in the State of Flor ith, and accept the obligations of, Sec	2 and 617.1508, Florida Statu ida. Such change was authori tion 617.0503, Florida Statute	tes, the above na zed by the corpo s.	amed corpo ration's boa	oration submits this statement for the purpard of directors. I hereby accept the appoint	pose of changing its r intment as registered	registered office agent. I am
	to the provisions of Sections 617.050; red agent, or both, in the State of Flor ith, and accept the obligations of, Sec Signature, typed or printed name of registered agen		5.				registered office agent. I am
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Gene C. Sitter, President 03-20-96
SIGNATURE AND TYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR DELEGATION DOLD DELEGATION DEL SIGNATURE: _

Daytimo Phone #