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12/26/1989

WEST BROWARD FREEWHEELERS, INC.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

P O BOX 9726 CORAL SPRINGS FL 33075 US		P O BOX 9726 CORAL SPRINGS FL 33075 US		3a Date of Report 12/26/1989 3b Date of Last Report 03/17/1994 4a Corporation Number 65-0240971 4b Applied For Not Applicable	
21	22	23	24	25	26
27	28	29	30	31	32
9 Name and Address of Current Registered Agent			10 Name and Address of New Registered Agent		
DEZERN, TOM 8010 HAMPTON BLVD. #404 N. LAUDERDALE FL 33068			81 Name 82 Street Address (P.O. Box Number is Not Accepted) 83 84 City, State, Zip FL 85		
11. I, the undersigned, being a resident of the State of Florida, do hereby certify that the foregoing is a true and correct copy of the original report as filed with the Secretary of State, and that the same is a true and correct copy of the original report as filed with the Secretary of State, and that the same is a true and correct copy of the original report as filed with the Secretary of State.					
SIGNATURE					
12. OFFICERS AND DIRECTORS			13. OFFICERS AND DIRECTORS		
P SCHARF, BERNARD 2000 NW 86TH TERR. CORAL SPRINGS FL			V KIRK ELLINGTON 580 NW 43 AVENUE PLANTATION, FL 33317		
V WILLIAMS, JAY 1408 SW 82ND TERR. N. LAUDERDALE FL			S CANDY SCHAESSER 7049 GOLF POINTE CIRCLE TAMPA, FL 33621		
S LUTEZ, KATHRYN 8016 NW 41ST CT. SUNRISE FL			T GAUDETTE, CINDY 7819 NW 39TH ST. CORAL SPRINGS FL		
D BEZERN, TOM 8010 HAMPTON BLVD., SUITE 404 N. LAUDERDALE FL			D HURT GELBERG 9435 N. SPRINGS WAY CORAL SPRINGS, FL 33076		
D LANE, GREGORY 4315 NW 70TH LANE CORAL SPGS. FL					
14. I, the undersigned, being a resident of the State of Florida, do hereby certify that the foregoing is a true and correct copy of the original report as filed with the Secretary of State, and that the same is a true and correct copy of the original report as filed with the Secretary of State, and that the same is a true and correct copy of the original report as filed with the Secretary of State.					
SIGNATURE: Mark V. Wichowski 4-30-95 325-776-2000					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					