## FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

1996

(7)N46086



Principal Place of Business Mailing Address							
2031 SW 36 AVE P.O. BOX 478 FT. LAUDERDALE FL 33312-4208 FT. LAUDERDALE FL 33302-04							
US		US			3. Date Incorporated or Qualified 3a. Date of Last Report 02/28/1995		
2. Principa	Principal Place of Business     2a. Mailing Address					4. FEI Number Applied For	
1		26	26 Suite, Apt. #, etc. 27			<b>65-0330050</b> Not Applica	
	pt. #, etc	<b>⊢</b> ·				5. Certificate of Status Desired See Required Fee Required	
City & State		City & State	City & State			6. Election Campaign Financing \$5.00 May Be	
3		28	1			Trust rund Contribution Added to Fees	
Zip ∃	Country	Zip	$\vdash$	untry		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes	
4	25 9. Name and Address of Curre	29	30	<del>,</del>		Florida Statutes L Yes M No  10. Name and Address of New Registered Agent	
	g, Italine and Address of Corre	int negistered Agont		81	Name		
FIGUR	CEDALD D.A						
FISHE, GERALD R A 2031 SW 36 AVENUE				82 Street Ad		; Address (P.O. Box Number is Not Acceptable)	
FT LAUDERDALE FL 33312				83			
110	ODENDALE I E 000 IE						
				84	City	FL 85 Zip Code	
SIGNATUF	Signature, typed or printed name of registered ag-	on and little if applicable (NI ND DIRECTORS	OTE Registere		it signature re	erequired wher rounstaings DATE  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	DELETE	111	TIFLE		<b>□</b> Change □ Additi	
NAM <del>?</del>	LIEBLER, GEORGE E. P.E.		121	NAME			
STREET ADDRE			135	STREET	ADDRESS		
C-TY-ST-Z-P	FT. LAUDERDALE FL		1.4 (	CHTY - S	T - ZIP		
TITLE	VD			2 1 TiTLE		☐ Change ☐ Addition	
NAME	TIMS, EUGENE F.			NAME	i		
STREET ADDRE					ADDRESS		
CITY - ST - ZIP	BATON ROUGE LA	□DELETE		CITY -: TITLE	ST-ZIP	Change Additi	
TITLE NAME	SCHORR, STEVEN M. P.E.	Пресен		NAME			
name Street addre	AAAA ALD VADIK OD				ADDRESS		
CITY-ST-ZIP	ABINGTON PA				ST-ZIP		
TITLE	TD	DELETE		TITLE		Crange Additi	
NAME	FISHE, GERALD R.A. P.E.		4 2	NAME			
STREET ADDRE	2031 SW 36 AVE		4.3	STREET	T ADDRESS		
City-St-7iP	FT. LAUDERDALE FL				ST - ZIP		
TITLE	D	DOFLEIE		TITLE		Change Additi	
NAME	DORION, ROBERT B J			NAME			
STREET ADDRE					T ADDRESS	3	
CITY - ST - ZIP	MONTREAL, OC, CANADA	Concrete			ST-ZIP	P.D. Additi	
TITLE	D D	☐ DELETE		TITLE		P, D. Additi	
NAME	WILKINSON, HAROLD J. P.1 1022 WATERDOWN RD	Ē		NAME	1 ADDRESS		
STHEET ADOR	BURLINGTON, ONT CAN						
CITY - ST - ZIP	DUILLITOTON, ONT OAK		0.4	(1) Y - 1	ST-ZIP	well to the exemption stated in Section 110 07/3/I/V Florida Statutes   further	

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), Florida Statutes. 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

FER 15 9996 (954) 581 4798