## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

SIGNATURE:

N9400000619 (6) DOCUMENT #

1. Corporation Name

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Suite, April 4, etc.    Suite, April 4, etc.				U3/4/88	60-00							
City & State    Country   25	Required	T		ite of Status Desired	5. Certificate o			ot. #, etc.			3.	Suite, Apt. #,
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2p   2s   2p   30   8. This corporation has licibity for intangle by Andres S   1   2p   30   9. Name and Address of Current Registered Agent   10. Name and Address of New Registered Agent   10. Name and Address   10. Name and	d to Fees			and Contribution	Trust Fund			aic	F			City & State
9. Name and Address of Current Registered Agent  9. Name and Address of Current Registered Agent    Secret Address   P. O. Box Number is Not Acceptable	199.032,	tax under s. 19	intangible ta			<i>i</i>	Country		<del></del>	ntry	Cou	Zın
Second Address of Current Registerion Agent   KODSI, ISAAC P.A. 2875 S UNIVERSITY DR   B2   Street Address (P.O. Box Number is Not Acceptable)					Florida Stat					•	25	χ.ην   .
KODSI, ISAAC P.A. 2875 S UNIVERSITY DR DAVIE FL 33328  1. Pursuant to the provisions of Sections 617.0502 and 677.1508. Foods Stelutes, the above named corporation submits this statement for the purpose of changing its region rigid agent, or both, in the State of Florids. Such change was authorized by the corporation's board of directors. I havetly accept the appointment as registrated or registrated agent, or both, in the State of Florids. Such change was authorized by the corporation's board of directors. I havetly accept the appointment as registrated or registration and the appointment as registrated and the appointment as registrated and the appointment as registrated or registration and the appointment as registrated and the appointment as registrated or registration and the appointment as registrated and the appointment as registrated and the registratio				and Address of Non-	TO. Name and	Name	B1	ent	Registered Age	iress of Current	. Name and Ad	L
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2875 S UNIVERSITY DR DAVIE FL 33328  18. City  FL 85 Zop  19. Pursuant to the provisions of Sections 617,0502 and 617,1508, Floridal Statutes, the above named corporation submits this statement for the purpose of changing its report or upgeletered agent, or both, in the State of Floridal, Such change was authorized by the corporation's floated of directors. I hereby accept the appointment as registered of armillar with, and accept the originations of Section 617,0503, Principal Statutes.  SIGNATURE  Systems harded of the state of Floridal Statutes.  DP  CPFICERS AND DIRECTORS  13. ADCHTONS/CHANGES TO OFFICERS AND DIRECTORS  12. Limit  DP  KODSI, JOSEPH  3300 UNIVERSITY PR., STE. 412  CORAL SPRINGS FL 33065  DV  MANE  KODSI, BABERT  3300 UNIVERSITY DR., STE. 412  CORAL SPRINGS FL 33065  DELETE  11 THE  DSI  MANE  KODSI, DANIEL  33 SIMEL ADDRESS  3300 UNIVERSITY DR., STE. 412  CORAL SPRINGS FL 33065  DELETE  4 TITLE  DSI  MANE  KODSI, DANIEL  33 SIMEL ADDRESS  3300 UNIVERSITY DR., STE. 412  CORAL SPRINGS FL 33065  DELETE  4 TITLE  DSI  MANE  KODSI, DANIEL  33 SIMEL ADDRESS  3300 UNIVERSITY DR., STE. 412  CORAL SPRINGS FL 33065  DELETE  4 TITLE  DSI  MANE  MANE  SIRCEL ADDRESS  300 UNIVERSITY DR., STE. 412  CORAL SPRINGS FL 33065  DELETE  4 TITLE  DSI  MANE  ADCHTONS CHANGE STO OFFICERS AND DIRECTORS  3 SIMEL ADDRESS  5 SIMEL ADDR			ole)	Number is Not Acceptat	iress (P.O. Box Num	Street Adu	82				AC P.A.	KODSI, IS
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SIGNATURE: JOSEPH KODS/ 2/16/96 753-530 Dayting Prince	ingt my near	()	(९६५	equired by Chapter 617,	e this report as requi	ed to execute	empowere	ceiver or trustee e	noration or the rec	ireator of the con	ne information in am an officer or o Block 12 or Block	certify that cath; that appears i

SIGNATURE AND TYPED OF REINTED NAME OF SIGNING OFFICER OR DIRECTOR