			~ -		TTT		
· · · · · · · · · · · · · · · ·	E NUW: FILIN	IG FEE IS \$61.	25]		LED	
NONPROFIT CORPORATION			ARTMENT OF STATE	Feb	09 19	98 8:()0an
ANNUAL REPOR	T	Secre	tary of State	Se	ecretar	vofS	tate
					Secretary of State		
DOCUMENT #	N97000	005798 (0))				
PALMETTO BAY S	reering commit	rtee, inc.			l döklt kötte antes antes	BALIS NAIDI DINI INAID	
Principal Place of Business 17415 SOUTH DIXIE HIGHWAY MIAMI FL 33157-5494		Mailing Address 17415 SOUTH DIXIE HIGHWAY					
		MIAMI FL 33157-5434	nwat	10/13/199	3. Date Incorporated or Qualified 10/13/1997		
				4. FEI Number	1536		pplied For ot Applicab
2. Principal Place of Business	;	28. Mailing Address		5. Certificate of Stat	us Desired	\$8.75	Additional
1 Sulte, Apt. #, etc.		26 Suite, Apt. #, etc.		6. Election Campaig		\$5.00	
City & State		27 City & State		Trust Fund Contri 7. Is this nonprofit c			
Zip	Country	28 Zip	Country		<u> </u>	fes 🔲 No	
25	· · · ·	29	30		/ Tax due June 30	Yes	No
9. Name and	Address of Current F	Registered Agent		10. Name and Addre	ese of New Regis	tered Agent	
LUDOVICI, EDWARD P	ESO		82 Street	Address (P.O. Box Number is	Not Acceptable)		
17415 SOUTH DIXIE H				Address (P.O. Box Number Is	Not Acceptable)	·····	······
			83	Address (P.O. Box Number Is	Not Acceptable)	······································	Codo
17415 SOUTH DIXIE H Miami Fl 33157-5434	IGHWAY	ind 617, 1508, Florida Stat	83 84 City	· · · · · · · · · · · · · · · · · · ·	······································	FL 85 Zip	Code ts registere
17415 SOUTH DIXIE H MAMI FL 33157-5434 11. Pursuant to the provisions office or registered agent, agent. I am familiar with, a SIGNATURE	IGHWAY		83 84 City	corporation submits this stat poration's board of directors. required when reinstating)	ement for the purp I hereby accept th	FL 85 Zip pose of changing i ne appointment as	ts registere registered
17415 SOUTH DIXIE H MAMI FL 33157-5434 11. Pursuant to the provisions office or registered agent, agent. I am familiar with, s SIGNATURE Signature, typed or pr 12.	of Sections 617.0502 a or both, in the State of and accept the obligatio	nd title If applicable. (N DIRECTORS	83 84 City utes, the above-named s authorized by the corp Florida Statutes. OTE: Registered Agent signature 13.	corporation submits this state poration's board of directors. required when reinstating) ADDITIONS/CHAN	ement for the purp I hereby accept th GES TO OFFICER	FL 85 Zip pose of changing ine appointment as DATE IS AND DIRECTOR	ts registere registered
17415 SOUTH DIXIE H MAMI FL 33157-5434 11. Pursuant to the provisions office or registered agent, agent. I am familiar with, a SIGNATURE	Of Sections 617.0502 a or both, in the State of and accept the obligatic off new of registered agent a OFFICERS AND E	nd title II applicable. (N	83 84 City utes, the above-named s authorized by the corp Florida Statutes.	corporation submits this state poration's board of directors. required when reinstating) ADDITIONS/CHAN	ement for the purp I hereby accept th GES TO OFFICER	B5 Zip Dose of changing ine appointment as DATE IS AND DIRECTOR IS AND DIRECTOR IS Change	ts registere registered
17415 SOUTH DIXIE H MAMI FL 33157-5434 11. Pursuant to the provisions office or registered agent, agent. I am familiar with, a SIGNATURE Signature, typed or pr 12. TITLE NAME STREET ADDRESS	IGHWAY of Sections 617.0502 a or both, in the State of and accept the obligatic inted name of registered agent a OFFICERS AND E DWARD P	nd title If applicable. (N DIRECTORS	B3 B4 City utes, the above-named s authorized by the corp Florida Statutes. OTE: Registered Agent signature 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	corporation submits this state coration's board of directors. required when reinstating) ADDITIONS/CHAN D ASST TAC COWARD A. L. W	ement for the purp I hereby accept th GES TO OFFICER	B5 Zip Doose of changing in appointment as DATE IS AND DIRECTOR IS AND DIRECTOR	ts registere registered
17415 SOUTH DIXIE H MAMI FL 33157-5434 11. Pursuant to the provisions office or registered agent, agent. I am familiar with, a SIGNATURE ISIGNA	IGHWAY of Sections 617.0502 a or both, in the State of and accept the obligatic inted name of registered agent a OFFICERS AND E DWARD P	nd title II applicable. (N DIRECTORS	B3 B4 City utes, the above-named s authorized by the corp Florida Statutes. OTE: Registered Agent signature 13. 1.1 TITLE 1.2 NAME	corporation submits this state coration's board of directors. required when reinstating) ADDITIONS/CHAN D ASST TAC COWARD A. L. W	ement for the purp I hereby accept th GES TO OFFICER	B5 Zip Doose of changing in appointment as DATE IS AND DIRECTOR IS AND DIRECTOR	ts registered registered RS IN 12
17415 SOUTH DIXIE H MAMI FL 33157-5434 11. Pursuant to the provisions office or registered agent, agent. I am familiar with, a SIGNATURE Signature, typed or pr 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME NAME NAME NAME NAME D / 221 PARISER, B	IGHWAY of Sections 617,0502 a or both, in the State of and accept the obligatic inted name of registered agent a OFFICERS AND E OFFICERS AND E DWARD P IN DIVIS HIGHWAY 3157-5434 VISC C MMINA RIAN W	IND RECTORS	83 84 City utes, the above-named s authorized by the corp Florida Statutes. 0TE: Registered Agent signature 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME	corporation submits this state coration's board of directors. required when reinstating) ADDITIONS/CHAN D ASST TAC COWARD A. L. W	ement for the purp I hereby accept th GES TO OFFICER	B5 Zip Dose of changing i 2000 Dose of changing i 2000 Date 2000 IS AND DIRECTOR 2000 IS AND DIRECTOR 2000 IS AND DIRECTOR 2000 IS AND DIRECTOR 2000	ts registered registered RS IN 12
17415 SOUTH DIXIE H MAMI FL 33157-5434 11. Pursuant to the provisions office or registered agent, agent. I am familiar with, a SIGNATURE Signature, typed or pr 12. 17. 12. 17. 12. 17. 17. 17. 17. 17. 17. 17. 17	IGHWAY of Sections 617,0502 a or both, in the State of and accept the obligatio inted name of registered agent a OFFICERS AND E DWARD P TH DIVIS HIGHWAY 3157-5434 VISC O MARA RIAN W H DADELAND BLVD.	IND RECTORS	83 84 City utes, the above-named s authorized by the corp Florida Statutes. 0TE: Registered Agent signature 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY: ST-ZIP 2.1 TITLE	corporation submits this state coration's board of directors. required when reinstating) ADDITIONS/CHAN D ASST TAC COWARD A. L. W	ement for the purp I hereby accept th GES TO OFFICER	B5 Zip Dose of changing i 2000 Dose of changing i 2000 Date 2000 IS AND DIRECTOR 2000 IS AND DIRECTOR 2000 IS AND DIRECTOR 2000 IS AND DIRECTOR 2000	ts registered registered RS IN 12
17415 SOUTH DIXIE H MAMI FL 33157-5434 11. Pursuant to the provisions office or registered agent, agent. I am familiar with, s SIGNATURE SIGNATURE 12. 11. 12. 13. 14. 14. 14. 14. 14. 14. 14. 14	IGHWAY of Sections 617,0502 a or both, in the State of and accept the obligatio inted name of registered agent a OFFICERS AND E DWARD P THIS HIGHWAY 3157-5434 VIEC CHMINA TAN W H DADELAND BLVD. 3156 VIEC CHMIN	Ind title II applicable. (N DIRECTORS Solution DELETE	83 84 84 84 City 94 City 94 City 94 City 94 City 95 96 11 12 13 1.1 1.2 1.3 1.4 1.7 2.1 11LE 2.2 2.1 2.1 2.3 2.4 CITY-ST-ZIP 3.1 3.1	corporation submits this state coration's board of directors. required when reinstating) ADDITIONS/CHAN D ASST TAC COWARD A. L. W	ement for the purp I hereby accept th GES TO OFFICER	B5 Zip Dose of changing i 2000 Dose of changing i 2000 Date 2000 IS AND DIRECTOR 2000 IS AND DIRECTOR 2000 IS AND DIRECTOR 2000 IS AND DIRECTOR 2000	ts registered registered IS IN 12
17415 SOUTH DIXIE H MAMI FL 33157-5434 11. Pursuant to the provisions office or registered agent, agent. I am familiar with, s SIGNATURE SIGNATURE III. SIGNATURE III. SIGNATURE III. NAME STREET ADDRESS CITY-ST-ZIP MAMI FL 33 TITLE NAME STREET ADDRESS STREET ADDRESS STR	IGHWAY of Sections 617,0502 a or both, in the State of and accept the obligatio inted name of registered agent a OFFICERS AND E DWARD P THIS HIGHWAY 3157-5434 VIEC CHMINA TAN W H DADELAND BLVD. 3156 VIEC CHMIN	Ind title II applicable. (N DIRECTORS Solution DELETE	83 84 City utes, the above-named s authorized by the corp Florida Statutes. 0TE: Registered Agent signature 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	corporation submits this state coration's board of directors. required when reinstating) ADDITIONS/CHAN D ASST TAC COWARD A. L. W	ement for the purp I hereby accept th GES TO OFFICER	B5 Zip Dose of changing ine appointment as DATE IS AND DIRECTOR IS AND DIRECTOR IS AND DIRECTOR IS AND DIRECTOR IS Change	ts registered registered IS IN 12
17415 SOUTH DIXIE H MAMI FL 33157-5434 11. Pursuant to the provisions office or registered agent, agent. I am familiar with, a SIGNATURE SIGNATURE IZ. TITLE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS STREET ADDRESS ST	IGHWAY of Sections 617,0502 a or both, in the State of and accept the obligatio of FICERS AND L OFFICERS AND L DWARD P TH DIVIE HIGHWAY 3157-5433 VICE CHARA RIAN W H DADELAND BLVD. 2156 VICE CHARA ENE P JR E JEUNE ROAD	IND RECTORS	83 84 84 84 City utes, the above-named s authorized by the corp Florida Statutes. 0TE: Registered Agent signature 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	corporation submits this state boration's board of directors. ADDITIONS/CHAN DASST TRA COWARD A. L.M 17415 S. DIA MINIMI FL	ement for the purp I hereby accept th GES TO OFFICER A. SIGNICI XIC HIM'S 33157	B5 Zip Dose of changing ine appointment as DATE IS AND DIRECTOR IS AND DIRECTOR IS AND DIRECTOR IS Change Image Image Image Image	ts registered registered IS IN 12 Addition
17415 SOUTH DIXIE H MAMI FL 33157-5434 11. Pursuant to the provisions office or registered agent, agent. I am familiar with, e SIGNATURE SIGNATURE IIILE NAME STREET ADDRESS CITY-ST-ZIP NAME STREET ADDRESS STREET	IGHWAY of Sections 617,0502 a or both, in the State of and accept the obligatio of FICERS AND L OFFICERS AND L DWARD P TH DIVIE HIGHWAY 3157-5433 VICE CHARA RIAN W H DADELAND BLVD. 2156 VICE CHARA ENE P JR E JEUNE ROAD	Ind title II applicable. (N DIRECTORS Solution DELETE	83 84 City Utes, the above-named s authorized by the corp Florida Statutes. 01E: Registered Agent signature 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS	Corporation submits this state boration's board of directors. ADDITIONS/CHAN DIST TRA COWARD A. L.M 17415 S. DIA MINMI FL DIRESIDENT ALLEN TAYL	ement for the purp I hereby accept th GES TO OFFICER X I & HIW'S 3 3 15 7 -	B5 Zip Dose of changing ine appointment as DATE IS AND DIRECTOR IS AND DIRECTOR IS AND DIRECTOR IS AND DIRECTOR IS Change	ts registered registered IS IN 12 Addition
17415 SOUTH DIXIE H MAMI FL 33157-5434 11. Pursuant to the provisions office or registered agent, agent. I am familiar with, a SIGNATURE ISIGN	IGHWAY of Sections 617,0502 a or both, in the State of and accept the obligatio of FICERS AND L OFFICERS AND L DWARD P TH DIVIE HIGHWAY 3157-5433 VICE CHARA RIAN W H DADELAND BLVD. 2156 VICE CHARA ENE P JR E JEUNE ROAD	IND RECTORS	B3 B4 City Utes, the above-named s authorized by the corp Florida Statutes. 0TE: Registered Agent signature 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS	Corporation submits this state boration's board of directors. required when reinstating) ADDITIONS/CHAN D / ASST TRA COWARD A. L.Y 17415 S. DI- MINIMI FL D / RESIDENA D / RESIDENA D / RESIDENA D / RESIDENA D / RESIDENA	ement for the purp I hereby accept th GES TO OFFICER A. 33157 33157	B5 Zip Dose of changing inelappointment as DATE IS AND DIRECTOR IS AND DIRECTOR IS AND DIRECTOR IS AND DIRECTOR IS Change I Change I Change I Change I Change	ts registered registered IS IN 12 Addition
17415 SOUTH DIXIE H MAMI FL 33157-5434 11. Pursuant to the provisions office or registered agent, agent. I am familiar with, a SIGNATURE SIGNATURE IZ. TITLE NAME STREET ADDRESS CITY-ST-ZIP MAMI FL 33 TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI FL 33 TITLE NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP	IGHWAY of Sections 617,0502 a or both, in the State of and accept the obligatio of FICERS AND L OFFICERS AND L DWARD P TH DIVIE HIGHWAY 3157-5433 VICE CHARA RIAN W H DADELAND BLVD. 2156 VICE CHARA ENE P JR E JEUNE ROAD	IND RECTORS	83 84 City Utes, the above-named s authorized by the corp Florida Statutes. 0TE: Registered Agent signature 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 STREET ADDRESS 3.4 CITY-ST-ZIP 3.1 TITLE 3.2 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME	Corporation submits this state boration's board of directors. ADDITIONS/CHAN DIST TRA COWARD A. L.M 17415 S. DIA MINMI FL DIRESIDENT ALLEN TAYL	ement for the purp I hereby accept th GES TO OFFICER A. 33157 33157	B5 Zip Dose of changing inelappointment as DATE IS AND DIRECTOR IS AND DIRECTOR IS AND DIRECTOR IS AND DIRECTOR IS Change I Change I Change I Change I Change	ts registered registered RS IN 12 Addition Addition Addition
17415 SOUTH DIXIE H MAMI FL 33157-5434 11. Pursuant to the provisions office or registered agent, agent. I am familier with, e SIGNATURE SIGNATURE SIGNATURE ITILE NAME STREET ADDRESS CITY-ST-ZIP MAMI FL 33 TITLE NAME STREET ADDRESS STREET ADDRE	IGHWAY of Sections 617,0502 a or both, in the State of and accept the obligatio of FICERS AND L OFFICERS AND L DWARD P TH DIVIE HIGHWAY 3157-5433 VICE CHARA RIAN W H DADELAND BLVD. 2156 VICE CHARA ENE P JR E JEUNE ROAD	INDERING IN A POPULADIA INTI A P	B3 B4 City Utes, the above-named s authorized by the corp Florida Statutes. OTE: Registered Agent signature 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.2 NAME	Corporation submits this state poration's board of directors. ADDITIONS/CHAN D / ASST TRA C WARD A. L. M 17415 S. DIA MIMING FL D / IRESIDENA ALLEN TAYLO 15905 SW S MIMMI FL D / TREA. KENNTH H. A	ement for the purp I hereby accept th GES TO OFFICER A. 33157 33157	B5 Zip Dose of changing inelappointment as DATE IS AND DIRECTOR IS AND DIRECTOR	ts registere registered TS IN 12 Addition Addition Addition
17415 SOUTH DIXIE H MAMI FL 33157-5434 11. Pursuant to the provisions office or registered agent, agent. I am familiar with, e SIGNATURE SIGNATURE ITLE NAME STREET ADDRESS CITY-ST-ZIP MIAMI FL 33 TITLE NAME STREET ADDRESS CITY-ST-ZIP MIAMI FL 33 TITLE NAME STREET ADDRESS CITY-ST-ZIP MIAMI FL 33 TITLE NAME STREET ADDRESS CITY-ST-ZIP MIAMI FL 33 TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	IGHWAY of Sections 617,0502 a or both, in the State of and accept the obligatio of FICERS AND L OFFICERS AND L DWARD P TH DIVIE HIGHWAY 3157-5433 VICE CHARA RIAN W H DADELAND BLVD. 2156 VICE CHARA ENE P JR E JEUNE ROAD	INDERING IN A POPULADIA INTI A P	B3 B4 City Utes, the above-named s authorized by the corp Florida Statutes. DTE: Registered Agent signature 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 STREET ADDRESS 3.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS	Corporation submits this state poration's board of directors. ADDITIONS/CHAN D / ASST TKC COWARO A. L.W I 7415 S. DIV MINTEL EL D / RESIDEN ALLEN TAYLO IS 905 SW 3 MINTEL FL D / TREM. KENNTH H. R IS 605 SW.	ement for the purp I hereby accept th GES TO OFFICER 4. 33157 33157	B5 Zip Dose of changing inelappointment as DATE IS AND DIRECTOR IS AND DIRECTOR	ts registere registered TS IN 12 Addition Addition Addition
17415 SOUTH DIXIE H MAMI FL 33157-5434 11. Pursuant to the provisions office or registered agent, agent. I am familiar with, a SIGNATURE III. Implementation SIGNATURE III. Implementation STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS CITY-ST-ZIP MIAMI FL 33 TITLE NAME STREET ADDRESS CITY-ST-ZIP MIAMI FL 33 TITLE NAME STREET ADDRESS CITY-ST-ZIP MIAMI FL 33 STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	IGHWAY of Sections 617,0502 a or both, in the State of and accept the obligatio of FICERS AND L OFFICERS AND L DWARD P TH DIVIE HIGHWAY 3157-5433 VICE CHARA RIAN W H DADELAND BLVD. 2156 VICE CHARA ENE P JR E JEUNE ROAD	INDERING IN A POPULADIA INTI A P	B3 B4 City Utes, the above-named s authorized by the corp Florida Statutes. OTE: Registered Agent signature 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 6.4 CITY-ST-ZIP 6.1 TITLE	Corporation submits this state poration's board of directors. ADDITIONS/CHAN D / ASST TKC COWARD A. L.W I 7415 S. DIA MINTI EL D / IRESIDEN ALLEN TAYL IS 905 SW 2 MINTI FL D / FREA. KENNTH H. A IS 605 SN. MINTI FL BEVERLY F. 6	ement for the purp I hereby accept th GES TO OFFICER 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7.	B5 Zip Dose of changing inelappointment as DATE IS AND DIRECTOR IS AND DIRECTOR	ts registered registered TS IN 12 Addition Addition Addition Addition Addition
17415 SOUTH DIXIE H MAMI FL 33157-5434	IGHWAY of Sections 617,0502 a or both, in the State of and accept the obligatio of FICERS AND L OFFICERS AND L DWARD P TH DIVIE HIGHWAY 3157-5433 VICE CHARA RIAN W H DADELAND BLVD. 2156 VICE CHARA ENE P JR E JEUNE ROAD	Ind title II applicable. (N DIRECTORS DELETE 15111 DELETE DELETE DELETE DELETE	B3 B4 City Utes, the above-named s authorized by the corp Florida Statutes. OTE: Registered Agent signature 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 6.4 CITY-ST-ZIP 6.1 TITLE	Corporation submits this state boration's board of directors. ADDITIONS/CHAN DIASST TRA EDWARD A. L.W 17415 S. DIA MINMI FL DIASSIDEN ALLEN TAYLO 15905 SW S MINMI FL DIAMI FL BEVERLY F. G DIASS C	ement for the purp I hereby accept th GES TO OFFICER 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7. 7.	B5 Zip Dose of changing interaction Zip DATE Change IS AND DIRECTOR Change IS AND DIRECTOR Change IS AND DIRECTOR Change IS Change Change I Change Change I Change Change I Change Change	ts registered registered