FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

	COR ANNL	PROFIT PORATION JAL RÉPON 1996		Secre	ARTMENT OF a B Mortham stary of State F CORPORATI						
]	OCUI Corporation	VENT #	P9200	00005560 (7	7)						
	•		CTIONS, INC.	·	-						
Principal Place of Business Mailing Address									e ili es ili es ili	OOHAF BEIDI OH	18 8
2904 N. FAIRWAY DR. JUPITER FL 33477				2904 N. Fairway Dr. Jupiter Fl. 33477							
								3. Date Incorporated or Qualifie		ate of Last R	
2.	Principal Pla	ace of Business		2a. Mailing Address	2a. Mailing Address			11/16/1992 4. FO Number	. . l	02/22/19	Applied For
21				26			65-0367018			Not Applicable	
22	Suite, Apt. #, etc.			Suite, Apt. #, etc.			5. Certificate of Status Desired			5 Additional	
	City & State	City & State		City & State				6. Election Campaign Financing			Required 00 May Be
23]			28				Trust Fund Contribution	[.]		ed to Fees
24	Zip]	25	Country	Zip 29	Country 30	•		8. This corporation has fability for Horida Statutes	or intangible (es - ETNo	tax under s	199.032,
	l			ent Registered Agent				10. Name and Address of New	·	d Agent	
					81	Name	:				
	CARTER, PAMELA 2905 N. FAIRWAY DR.							ss (P.O. Box Number is Not Accept	(able)		
JUPITER FL 33477					83	l					
					84	City				DE 7.	ırı Code
-	C Down and b	- Abo Jole	-1 O-1 007 057	20	1	,			F	_ - '	•
11	or registere	o the provisions ad agent, or bot be and accept the	of Sections 607.050 th, in the State of Flo	02 and 607.1508, Florida Stalut orida. Such change was authoriz ction 607.0505, Florida Stalutes	tes, the above r red by the corp	named c oration's	corporat s board	ion submits this statement for the p of directors. Thereby accept the ap	ourpose of a oppintment a	hanging its r as registered	registered office Lagerit. Lam
SI	GNATURE _	Par	le colligations 12. 38	PAMELA	CHATA	·R			1/25/	91-	
12		Statural typed or pr	inted name of registered ago	ent and tide if applicable. (NO ND DIRECTORS	DTE: Ringistered Agor	it somat ir c	responsible	the segretating	DAM FALESTER ST		
	LE	D	OFFICENS A	DELETE	1. 1 TITLE		D	ADDITIONS/CHANGES TO O	FICERSAN	- <u></u>	
NA	ME	CARTER, F	PAMELA		1.2 NAME		CAR	RTER, PANELA		_1 - · · · · · g ·	
			IRWAY DRIVE		1.3 STREET	ADDRESS	29	R <i>ter, Panela</i> 04 <i>N Fai</i> rway DR Piter, FL 33	IYE		
CIT	IY-S1-ZIP	JUPITER F	L 33477	ET belete	14 CINY+S	1 - 7IP	Ju	PITER, FL 33	477		
	ME			☐ DELETE	2 1 TITLE 22 NAME					☐ Change	Addition
	REFT ADDRESS				2.3 STREET	ADDRESS					
CII	Y - ST - ZIP				2.4 CITY - S						
TIT				☐ DELETE	3 1 1 ITLE					Change:	☐ Addition
	ME DEET ADDDECC				3 2 NAME						
	REET ADDRESS 'Y-ST-ZIP				3.3 STHEET 3.4 CHY-S						
TIT				☐ DELETE	4. 1 TITLE	1 - 21P				Change	Add:tion
NA	ME				4.2 NAME					_ ,	
STE	REE1 ADDRESS				4 3 STREET	ADDRESS					
_	Y-ST-ZIP			□ DCLETE	4.4 CITY - S	1 - ZIP	ļ				
TITLE				☐ DELETE	5 1 TITLE					Change	☐ Addition
	REFT ADDRESS				5.2 NAME 5.3 STREET	ADDRESS					
	Y-S*-ZIP				5.4 City - Si						
Ţij				DELETE	6. 1 TITLE	··········				☐ Change	Addition
NA	ME				6.2 NAME						
	REET ADDRESS				63 STREET						
CIT	Y-ST-ZIP				6.4 CITY - ST	1 - 2IP					

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualfy 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 arrival 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 enipowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 13 if changed, or on an attachment with an address.

SIGNATURE: James

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/15/96 407-7436613

CR2E034 (12/95)