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

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

ANNUAL REPORT 1996		ary of State CORPORATIONS			
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Principal Place of Business	Maling Address				
1710 NW 22ND COURT	1710 NW 22ND COU BAY 5	URI			
BAY 5 POMPANO BEACH FL 33069	POMPANO BEACH I	FL 33069	3. Date Incorporated or Qualified	3a. Date of Last Re	port
			01/21/1993	09/05/19	95
. Principal Place of Business	2a. Mailing Address		4. FEI Number	↓	pplied For
	26		65-0377050		ot Applicable Additional
Suite, Apt. #, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired		equired
City I State	City & State		6. Election Campaign Financing	\$5.00	May Be
City & State	28		Trust Fund Contribution	니 Added	to Fees
Zip Country	Zıp	Country	8. This corporation has liability for i	ntangible tax under s 	199 032.
25	[29]	30	Florida Statutes		
9. Name and Address of Co	urrent Registered Agent	81 Name	TO, Harrie and Madroca at Man 1		
CHAVET EDIC		1 1	ress (P.O. Box Number is Not Acceptab	olie)	<u></u>
CHAYET, ERIC 1710 NW 22 COURT		82 Street Add	read II .O. DON HUITING IS 1100 ACCOPACE	,	
BAY 5		83			
		1 1		100 7	
POMPANO BEACH FL		84 City		85 ∠ 	Code
POMPANO BEACH FL 11. Pursuant to the provisions of Sections 607	. 0502 and 607,1508, Florida Stati If Florida Such change was author	ates, the above named corporation's boo	vation submits this statement for the pu and of directors. Thereby accept the app		
11. Pursuant to the provisions of Sections 607 or registered agent, or both, in the State of familiar with, and accept the obligations of, SIGNATURE - Signature, by other productions of sequences.	अक्रक है के हार हा कि कि कि कि ए	utes, the above named corporation's booking by the corporation's booking.	പെ ഡ്ലസ് ട്രേഷ് ശ്ല	rpose of changing its no ointment as registered	egistered office agent. Fam
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14. 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 arrival 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE:

SIGNATURE AND TYPEO OR PRINTED NAW OF SIGNING OFFICER OR DIRECTOR

CHAPT

4/30/96

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