SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/1/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.)

PROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P93000011117 (7)

ROAT BUINDS OF FLORIDA INC.

DOM	DEINDO OF FEORIDA, INC.	•										11
Principal Plac	e of Business	Mailing Address					- - 1005:1004 140 14100 14111 00415 00415 00	RA EDIDI ILDI				VIII
714 SE 17TH FT LAUDERD US	H ST Dale FL 33316	P. O. BOX 22961 FT LAUDERDALE FL 33316 US					3. Date Incorporated or Qualified	3a. Da	te of L	 ast Re _l		
							02/08/1993	12	/04/1	995		
— '	lace of Business	2a. Mailing Address				•	4. FEI Number				hed F	
Suite, Apt.	# atc	26 Su la	Apt. #, etc				65-0406107		60	Not 75 Ac		icable
22	#, Clo	27	ript. W. Oto				5. Certificate of Status Desired			e Req		
City & Stat	e	<u> </u>	City & State				Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees				
Zıp	Country	Zip		Countr	У		8. This corporation has liability for it	itangible				
24	25	29		30			Florida Statutes [V]					
	9. Name and Address of Curre	nt Registered A	gent	81	iΤ	Name	10. Name and Address of New Rec	jistered #	gent			
	FORD, L.L., JR.											
	143 N OCEAN BLVD 204			82	2	Street Addre	ess (P.O. Box Number is Not Acceptable	e)				
	LAUDERDALE FL 33308			83	3							
,				84	1	City			85	Zip Co	ode	
L						•		FL				
office or i agent I a	to the provisions of Sections 607.05t registered agent, or both, in the State am familiar with, and accept the oblig	e of Florida, Such	i change was i	authorized by	v tr	named corpor ne corporation	ration submits this statement for the pun's board of directors. Thereby accept	rpose of c the appoi	rtment	ig its reg	egistë Iistere	ed ed
SIGNATURE	Signature, typed or printed name of registered ag	ent and trie if applicab	ie (NC	TE, Registereo As	jent	t signature require	d witsen neinstuting)	DAFE				
12.	OFFICERS AN	ND DIRECTORS		13.			ADDITIONS/CHANGES TO OFFIC	ERS AND	DIREC	TORS	IN 13	2
TITLE	P	l	DELETE	1 F HILE				Į	Cna	ange [_] A	dd-tion
NAME	ALFORD, L.L. 714 SE 17TH ST			1.2 NAME								ļ
STREET ADDRESS	FT LAUDERDALE FL 33316			1 3 STREE								
CITY-ST-ZIP TITLE	V		DELETE	14 CITY - 2 1 TIFLE	51	- 2 r'			Cha	ange	T A	dd tion
NAME	QUATTLEBAUM, RON	`		22 NAME				١	_	, ,	_	
STREET ADDRESS	714 SE 17TH ST			2 3 STREE	ΤĄ	DDRESS						
CITY-ST-ZIP	FT LAUDERDALE FL 33316			2 4 CHY	ST	(-ZIP						
TITLE		[DELETE	31 TITLE					Cha	ange [A	dd-tion
NAME				3.2 NAME								
STREET ADDRESS				3 3 STREE								
CITY-ST-ZIP TITLE			DELETE	34 CHTY	• • •	- Z)P		· · · · · ·	T Ch	ange	T A	ddition
NAME				4 2 NAME				L		"as L		
STREET ADDRESS				43 STAEF		IDDRESS						
CITY - ST - ZIP				4.4 C(TY -								
TITLÉ			DELETE	5 1 TITLE					Cna	ange [A	dd tion
NAME				5.2 NAME								
STREET ADDRESS				5.3 STREE								
CITY-ST-ZIP TITLE			DELETE	54 CITY -		- ZIP			Cn	3000	77	dd tion
HILL				= 0 1 1/1 5					1 0/16	THE PARTY		

64 City - St - ZIP 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 annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under eath, that I am an officer or director of the corporation or the receiver or trusted empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changes for on an attachment with an address.

62 NAME 6.3 STREET ADDRESS

NAME

STREET ADDRESS

SIGNATURE:

SIGNATURE AND TYPED OR PRATED NAME OF SIGNING OFFICER OR DIRECTOR

954-760-9550