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PROFIT CORPORATION ANNUAL REPORT



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

1996 **DOCUMENT #**

Corporation Name

P93000014821 (1)

COMPASS ROSE INVESTMENT, INC.								
Principal Place			Mailing Address			T CARLINGS SIN INIDA HISK AREST OR		
4 CAPRI COUNT PALM COAST FL 32137 US			-1 Capri Gourt- Palm Coast FL 32137 US					
2						 Date Incorporated or Qualified 02/26/1993 	3a. Date of La: 05/0	st Report 1/1995
2. Principal Pla コカに ぬi	nce of Business APBELLA	CAUGE	2a. Mailing Address	10 41	\ D.T.	4. FEI Number		Applied For
ا(الـــــــــــــــــــــــــــــــــــ		COURT	26 25 MARBEI Suite, Apt. #, etc.	un cov	T-91	59-3168623	***	Not Applicable
2			27			5. Certificate of Status Desired		.75 Additional ee Required
Oity & State 3 PALM		T FL	City & State 28 PALM CO	AST, F	·,	6. Election Campaign Financing		5.00 May Be
Zφ) (Country	Zp Zp	Country	<u> </u>	Trust Fund Contribution 8. This corporation has liability for it	A	or s. 100 033
4 321	37 25	USA	29 32137	30	SA	Florida Statutes Yes		ar 6 199.032,
	9. Name and	Address of Current F	legistered Agent			10. Name and Address of New R	egistered Agent	
EDANG	NEO 1 1EE 10			81	Name			
TKANU ALCAB	cies, J. Lee Jr Ri-Court -	i.		82	Street Add	ress (P.O. Box Number is Not Acceptabl		
	COAST FL 321	37		83	<u>~5 </u>	MARBELLA COURT		
, , , ,	00/101 12 021	01						
				84	City		F1 85	Zip Code
raminar witi Signaturse	n, and accept the	obligations of, Section dinance of regelined agent and OFFICERS AND I	bu7.0005, Florida Statutes	3. 016 Royistered Agrint s		anion submis this statement for the pur rd of directors. I hereby accept the appo d wher reinstaling) ADDITIONS/CHANGES TO OFFI	DATE	
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NAME.	FRANCIES	s, Jesse L Jr.		1.2 NAME				
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(AME				6 2 NAME				
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017 S - 7P 14	codify that the in	foanshon ermaliad will	the fline is not stock 2	64 CHY-S1-			7000	
certify that footby that I appears in	the information inc am an officer or c Block 12 or Block	dicated on this annual indicated on this annual indicator of the corporation of the corp	report or supplemental ann or or the ecelum or truste an attaching at with an addr	ual report is true e emperiered to especial	and accura execute this	or the exemption stated in Section 119.0 te and that my signature shall have the s s report as required by Chapter 607, Flo	ে(৩)(৪), Florida St. same legal effect a rida Statutes; and	aidles, i further as if made under I that my name

SIGNATURE:

SIGNING OFFICER OR DIRECTOR