

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

1995



APPROVED AND FILED

95 MAY -1 PM 3: 25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 7913000076455
MEDICAL & CHIROPRACTIC CLINIC, INC.
4602 N. NEBRASKA
TAMPA, FL 33603

4602 N. NEBRASKA AVE ← SAME
TAMPA, FL 33603

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10/1/93 1994

65-0447629

\$8.75 Additional Fee Required

\$5.00 May Be Added to Fee

X

10 Name and Address of New Registered Agent

REINMAN HALLELL Colahem Mitchell
1825 SOUTH LIVERY LANE DRIVE
ATTORNEY BRUCE MITCHELL
MELBOURNE FL 32901

ham

SECRETARY
MICHELE ZAKRZEWSKI
4602 N. NEBRASKA AVE.
TAMPA, FL 33603
PRESIDENT
FREE LOND LEROY WILLIAMS
11061 ELLISON WILSON RD.
N. P. B., FL 33408

MICHELE ZAKRZEWSKI X
4602 N. NEBRASKA AVE
TAMPA, FL 33603
PRESIDENT X
FREE LOND LEROY WILLIAMS
11061 ELLISON WILSON RD.
N. P. B., FL 33408
PRESIDENT X
BRUCE HUMPHREY
5220 PALM MEYERS LANE
PLANT CITY, FL 33567 X
CFO & SECRETARY
KEVIN KRUEGER
3132 W LAMBERT APT # 201 TAMPA, FL
33614

SIGNATURE:

Bruce Humphrey

4/24/95

FILE FEE AFTER MAY 1 IS \$225.00

ANNUNCIAL REPORT
1995



DOCUMENT # P93000007674(3)

ARIAS T CORPORATION

600001504418
-06/02/95--01027--002
****200.00 ****200.00

425-C S.W. 22ND Avenue 425-C SW 22ND Avenue
MIAMI, FL 33135 Miami, Fl 33135

21	7925 N.W. 12th Street	26	7925 NW 12th Street
22	324	27	324
23	Miami, Florida	28	Miami, Florida
24	33126	29	33126
25	USA	30	USA

9. Name and Address of Current Registered Agent

ARIAS MARINO
7601 W. Flagler ST
Suite 204
MIAMI, FL 33144

81	Name	
82	Street Address	7925 N.W. 12TH Street
83	Suite	Suite 324
84	City	Miami,
85	Zip Code	FL 33126

10. Name and Address of New Registered Agent

11. This report was prepared in accordance with the Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office to the above listed address in the State of Florida. Such change was authorized by the corporation's board of directors, except the appointment as registered agent. I am hereby authorized to accept the filing of this statement on behalf of the Florida Statutes.

PREPARED BY

Print Name and Address of Registered Agent

City

12. ADDITIONAL REGISTERED OFFICES

0001	P/S/T
0002	ARIAS MARINO
0003	860 N.W. 1st ST., Suite 4
0004	Miami, Fl. 33131
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13. ADDITIONAL CHANGES TO OPERATORS AND DIRECTORS OF CO

1	11000	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2	12000	
3	13000	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4	14000	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5	15000	
6	16000	<input type="checkbox"/> Change <input type="checkbox"/> Addition
7	17000	<input type="checkbox"/> Change <input type="checkbox"/> Addition
8	18000	<input type="checkbox"/> Change <input type="checkbox"/> Addition
9	19000	
10	20000	<input type="checkbox"/> Change <input type="checkbox"/> Addition
11	21000	
12	22000	
13	23000	
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15	25000	
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18	28000	
19	29000	
20	30000	

14. I, the undersigned, hereby certify that the above information is true and correct, and that the above named corporation is authorized to accept the filing of this statement on behalf of the Florida Statutes. I am hereby authorized to accept the filing of this statement on behalf of the Florida Statutes.

SIGNATURE: *[Signature]*
NAME AND TITLE OF REGISTERED AGENT OR SIGNING OFFICER OR OFFICER

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APPROVE
AND
FILE

1995



DOCUMENT # P93000076788 (7)

SKYRACER, INC.

10020 SW 6 CT
PEMBROKE PINES FL 33025

10020 SW 6 CT
PEMBROKE PINES FL 33025

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9 Name and Address of Current Registered Agent

DUNCAN, RICHARD
10020 SW 6 CT
PEMBROKE PINES FL 33025

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12

D
DUNCAN, RICHARD
10020 SW 6 CT
PEMBROKE PINES FL 33025

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01/01/1994

65-045647

\$8.75 Additional Fee Required

\$5.00 May Be Added to Fee

Name and Address of New Registered Agent

81
82
83
84

FL 85

4/27/95

J.P. 6/6

SIGNATURE:

4/27/95 (30) 14448266

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CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Matheson
Secretary of State
1995

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AND
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95 MAY -1 AM 8:33

DOCUMENT # 93000076794

Paradise Enterprises of Destin, Inc.

TALLAHASSEE, FLORIDA

BOOKED 1507011
06/07/95-111039-025
*****200.00 *****200.00
DO NOT WRITE IN THIS SPACE

1. Name of Corporation		2. Mailing Address	
433 Webster Street Fort Walton Beach, FL 32547		P.O. Box 2761 Fort Walton Beach, FL 32549	
3. Date incorporated or Qualified	3a. Date of Last Report	4. FEI Number	
11/15/93		59 3216523	
5. Certificate of Status Desired		6. Election Campaign Financing Trust Fund Contribution	
<input type="checkbox"/>	\$8.75 Additional Fee Required	<input type="checkbox"/> \$5.00 May Be Added to Fees	
7. State of Incorporation	7a. State	8. This Corporation Qualifies for Alternative Tax under S. 1361(b)(1)	
FL	FL	<input type="checkbox"/>	
9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent		

Rodney L. Souza, Jr.
433 Webster Street
Fort Walton Beach, FL 32547

81 Rodney L. Souza, Jr.
82 433 Webster Street
83
84 Fort Walton Beach FL 85 32547

11. I, the undersigned, certify that the information furnished by this corporation is true and correct to the best of my knowledge and belief, and that the information is true and correct to the best of my knowledge and belief, and that the information is true and correct to the best of my knowledge and belief.

12. OFFICERS AND DIRECTORS	13. ALTERNATE OFFICERS AND DIRECTORS
<p>12.1 NAME: PRESIDENT Rodney L. Souza, Jr. 12.2 ADDRESS: 433 Webster St. Fort Walton Beach, FL 32547</p>	
<p>12.3 NAME:</p>	
<p>12.4 NAME:</p>	
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<p>12.14 NAME:</p>	
<p>12.15 NAME:</p>	
<p>12.16 NAME:</p>	
<p>12.17 NAME:</p>	
<p>12.18 NAME:</p>	
<p>12.19 NAME:</p>	
<p>12.20 NAME:</p>	

14. I, the undersigned, certify that the information furnished by this corporation is true and correct to the best of my knowledge and belief, and that the information is true and correct to the best of my knowledge and belief, and that the information is true and correct to the best of my knowledge and belief.

SIGNATURE: *Rodney L. Souza, Jr.*
15. Date: 5/1/95
16. Address: 104866 10159

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DOCUMENT # P93000076930 (5)

PHYSICIANS MANAGEMENT NETWORK, INC.

5260 S.W. 3RD ST
MIAMI FL 33134

5260 S.W. 3RD ST
MIAMI FL 33134

21 *5260 SW 3rd St* 26 *5260 SW 3rd St*
 22 27
 23 *MANRESA, VERONICA* 28 *MANRESA, VERONICA*
 24 *5260 SW 3rd St* 29 *5260 SW 3rd St* 30 *MIAMI FL 33134*

9 Name and Address of Current Registered Agent

MANRESA, VERONICA
5260 S.W. 3RD STREET
MIAMI FL 33134

3
4 11/01/1993 08/09/1994

~~APPLIED FOR~~ 65-0512005

\$8.75 Annual
License Fee

\$5.00 Initial
Application Fee

10 Name and Address of New Registered Agent

FL 85

MANRESA, VERONICA (Current Agent)

4-17 95

PSD
MANRESA, VERONICA
5260 S.W. 3RD ST.
MIAMI FL 33134

13

5260 SW 3rd St

SIGNATURE:

MANRESA, VERONICA
SIGNATURE AND TYPE (OR PRINT) NAME OF REGISTRANT OR AUTHORIZED OFFICER

4-17 95 *(Current Agent)*

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APPROVED
AND

1995



FLORIDA DEPARTMENT OF STATE
JAMES B. MOYER
GOVERNOR

DOCUMENT #

T.E. Ritter Architecture, Inc.
5300 Northwest 33rd Avenue #108
Fort Lauderdale, Florida 33309

5300 Northwest 33rd Avenue
Suite 108
Fort Lauderdale, Florida 33309

Same

3. Date of Initial Qualification: Nov. 1, 1993
3a. Date of Last Report: 6/7/94

4. License Number: 65-0448374

5. Amount of State Fee: \$8.75 Additional Fee Required

6. Amount of Local Fee: \$5.00 May Be Added to Fees

8. This architect has paid the appropriate fee under the provisions of the law: Yes No

21. 5300 NW 33rd Avenue	26. 5300 NW 33rd Avenue
22. Suite 108	27. Suite 108
23. Ft. Lauderdale, FL	28. Ft. Lauderdale, FL
24. 33309	29. 33309
25. USA	30. USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Thomas E. Ritter - President
T.E. Ritter Architecture, Inc.
Suite 108
Fort Lauderdale, Florida 33309

81. Thomas E. Ritter
82. 5300 Northwest 33rd Ave. #108
83.
84. Fort Lauderdale, FL 33309

12. NAME	13. ADDRESS
NAM:	Pres., VP, Sec., Treas. <input checked="" type="checkbox"/> Add
Officer:	Thomas E. Ritter
	15947 East Wind Circle
	Sunrise, FL 33326
NAM:	
Officer:	
NAM:	
Officer:	
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Officer:	
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Officer:	
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Officer:	
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Officer:	
NAM:	
Officer:	

20001506652
06/07/95-01005-014

14. SIGNATURE: *Thomas E. Ritter* THOMAS E. RITTER, PRESIDENT
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER IN FULL

5/19/95 (305) 731-9070

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DOCUMENT # P93000078045 (0)

ENGINEERING & DESIGN SERVICES, INC.

2102 CASCADES BLVD #205
KISSIMMEE FL 34741

PO BOX 422726
KISSIMMEE FL 34742

3 11/05/1993 3a 05/01/1994

4 59-3210144

\$8.75 Additional
Fee Required

\$5.00 May Be
Added To Fee

21 801 S FIRST ST

2a PO BOX 1500

22
23 Lake Wales, FL

27
28 Lake Wales, FL

24 33003

29 33003 30

9 Name and Address of Current Registered Agent

10 Name and Address of New Registered Agent

BUSINESS TIME SAVERS INC.
1633 EAST VINE STREET
SUITE 206
KISSIMMEE FL 34744

82 4125 BOX 204 ST.
83 Bergamont Ct.

84 Kissimmee

FL 85 34746

12 D
KEELER, BRIAN M
2102 CASCADES BLVD., #205
KISSIMMEE FL 34741

13 801 South First St.
Lake Wales, FL 33853

Brian M Keeler
6/1

SIGNATURE: BRIAN M. KEELER

Brian M Keeler

SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-20-95 (013) 6-16-9711