r	ILE NOW: FIL	ING FEE AFTER	FILED					
COF	CORPORATION		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham			Apr 25 1997 8:00am		
ANNUAL REPORT			Secretary of State DIVISION OF CORPORATIONS		Secretary of State			
DOCU 1. Corporatio		930000216 NG CORPORATION	609 (1)				2	
Principal Plac			g Address			   10011001100 40000 4041 00414 00414 0041	I ANGUN UNUN UNUN AUUU DA	IN HEAF FANNE
1111 S. FEDERAL HWY. 1111 S. FEDERAL HWY. #226 STUART FL 34994 STUART FL 34994-3834								
STURNI PL 34	399	STUAN	1 FL 34994-3834			3. Date Incorporated or Qualified	Sa, Date of Last	Report
2. Principal P	lace of Business	<b>28.</b> Ma	ailing Address			03/18/1993 4. FEI Number	04/30/1996	Applied For
21		26				59-3173416		lot Applicable
Suite, Apt	#, etc.	27	ite, Apt. #, etc.			5. Certificate of Status Desired		Additional Required
City & Stat	e	Ci 28	ty & State			6. Election Campaign Financing Trust Fund Contribution		) May Be I to Fees
Zip	Country Zip			Count	ry	8. This corporation has liability for	intangible tax under	
24	9. Name and Addr	29 ess of Current Registere	ad Agent	30	<u> </u>	Florida Statutes	Yes No	
	es cosentino			8	1 Name		······································	
1111 S. FEDERAL HIGHWAY 82 Street Address SUITE 226						ress (P.O. Box Number is Not Acceptal	ole)	·····
	ART FL 34994			8	3			
				8	4 City		FL <sup>85</sup> <sup>Zip</sup>	Code
11. Pursuant	to the provisions of Sec	tions 607.0502 and 607.	1508, Florida Statu	ites, the abo	ve-named corp	poration submits this statement for the p tion's board of directors. I hereby acce	uroose of changing	its registered
agent I a	m familiar with, and ac	copt the obligations of, Se	oction 607.0505, Fl	lorida Statut	es.	tion's board of directors. I hereby acce	or the appointment a	s registered
SIGNATURE		na of registered agent and lide if ap			gent signature requi	red when reinslating)	DATE	
12. TITLE	PDT	DEFICERS AND DIRECTO	DELETE	13.		ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTO	
NAME	MATHERS, WILLIAM J 1111 S. FEDERAL HWY. SUITE 226			1.2 NAM	E		•	**
STREET ADDRESS	STUART FL	HWY. SUILE 226			ET ADDRESS			
TITLE	5		DELETE	1.4 CITY 2.1 TITLE			Change	Addition 5
NAME STREET ADDRESS	COSENTINO, JAM 1111 S. FEDERAL			2.2 NAM				
CITY - ST- ZIP	STUART FL 34994				ET ADDRESS ST-ZIP	· .	24	
THLE			DELETE	3.1 TITLE		· · · · · · · · · · · · · · · · · · ·	Change	Addition
NAME STREET ADDRESS				3.2 NAM 3.3 STAF	e Et address			
C/TY - ST - ZIP	· · · · · · · · · · · · · · · · · · ·	·····		3.4. CITY				
THLE NAME			DELETE	4.1 TITLE			Change	Addition
NANGE STREET ADDRESS				4.2 NAM 4.3 STRE	et adoress			
CITY - ST - ZIP				4.4 CITY		······································		
TITLE NAME			DELETE	5.1 TITLE 5.2 NAM			🛄 Change	Addition
STREET ADDRESS					ET ADDRESS			
CITY-ST-ZIF				5.4 CITY	-ST-ZIP	u,		
11TLE NAME			[] DELETE	6 1 TITLE 6.2 NAM			L Change	Addition
STREET ADDRESS					ET ADDRESS			
CHY SI ZIP	workly that the inform	officer as marking with a first of	line does and an "	6.4 CITY				
informatio	n indicated on this ann ficer or director of the	ual report or supplementa corporation or the receive	al annual report is t r or trustee empoy	true and active exercises to exercise to e	curate and that	d in Section 119.07(3)(i), Florida Statute rmy signature shall have <b>the sa</b> me lege tt as required by Chapter 607, Florida S	<ul> <li>a runner certify that l effect as if made us latutes; and that my</li> </ul>	cine nder oath; that name
		it changed, or on an atlac	chment with an ad	dress.				
SIGNAT	URE:	W Ullat		age	×, Pa	les 4/16/97 S	1209-03	25