Suite Apr R, etc : Suite Apr R, etc : 2 2 2 2 2 2 2 2 2	COF ANNU	ILE NOW: FILING PROFIT RPORATION UAL REPORT 1997		FLORIDA DEPART Sandra B. Secretary DIVISION OF C	MENT OF STATE Mortham	May 08	ILED 1997 8 ary of S	
1887 PALL BEACH LAKES BLVD 1897 PALL BEACH FL SHORS 9. Date Incorporated or Clustified 98. Date of Lest Report 2. Principal Pace of Business 24. Maling Address 1 28. Sole, APL # OC 2. Principal Pace of Business 24. Maling Address 2. Principal Pace of Business 24. Maling Address 3. Criticator of Business 25. Sole, APL # OC 3. Criticator of Business 25. Sole, APL # OC 4. Tell Number 8. Certificator of Business 3. Control Status 8. Certificator of Business 3. Control Status 8. Certificator of Business 4. Rene and Address of Current Replaymed Agent Country 4. Rene and Address of Current Replaymed Agent 10. None and Address of Now Replaymed Agent 4. Rene and Address of Current Replaymed Agent 10. None and Address of Now Replaymed Agent 4. Rene and Address of Current Replaymed Agent 10. None and Address of Now Replaymed Agent 4. Rene and Address of Current Replaymed Agent 10. None and Address of Now Replaymed Agent 4. Rene and Address of Current Replaymed Agent 10. None and Address of Now Replaymed Agent 4. Rene and Address of Current Replaymed Agent 10. None and Address of Current Replaymed Agent 1. Rene and Address of C	RICHAR	nd J. Lazzara, D.M.D)., P.A .					
2. Principal Pace of Business 24. Mailing Address 46. FEI Amber 47. Bornbard 47. Bornd 47. Born			1897	PALM BEACH LAKES				
1 20 <t< th=""><th></th><th></th><th></th><th></th><th></th><th>06/01/1993</th><th></th><th>Report</th></t<>						06/01/1993		Report
Suite, April #, etc. Suite, April #, etc.	2. Principal P 21	face of Business		ailing Address				4./
Crop 6. State Crue 7. State Crue 7. State Function State 2 2 Trutt Fund Controlucion Added to Fave 2 2 2 Country 70 Country Trutt Fund Controlucion Added to Fave 3 2 2 2 Country 8 The corporation has liability for interglobility and or interglobility or interglobility and or interglobility an		#, etc		uite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75	Additional
Zp- tal Country (zp)	City & Stal	le	C	ity & State			\$5.00	May Be
	Zip	Country	Z	p	Country			
LAZZARA, RCHARD J tas? PALM BEACH LAKES BLVD WEST PALM BEACH LAKES BLVD 61 Name 142 Street Address (P.O. Box Number is Not Accoptable) 63 64 City FL 63 64 City FL 64 71. Pursuant to the provisions of Socitions 607 0502 and 607 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered optics or regatered agent, or both, in the State of Rolida. Such change was submits and the statement for the purpose of changing its registered optics. Tam banker with, and accept the obligations of Socition 907.0509. Florida Statutes Exponential of the statement for the purpose of changing its registered optics. Tam banker with, and accept the obligations of Socition 907.0509. Florida Statutes 12. OFFICIENS AND DIRECTORS 13. ADDITIONSCHANGES TO OFFICERS AND DIRECTORS IN 12 13. ADDITIONSCHANGES TO OFFICER ADD DIRECTORS IN 12 Date 14. D OFFICIENS AND DIRECTORS IN 12 Date 15. ADDITIONSCHANGES TO OFFICERS AND DIRECTORS IN 12 Date 15. ADDITIONSCHANGES TO OFFICERS AND DIRECTORS IN 12 Date 15. Date Date Date 15. ADDITIONSCHANGES TO OFFICERS AND DIRECTORS IN 12 Date 16. Date Date <	24				30	Florida Statutes	Yes No	
WEST PALM BEACH FL 33400 Image: Address (F.U. Box Number's indic Address (F. E. Box Number's (F. Box Number's (F. Box Number's (F. Box Nu		ZARA, RICHARD J			81 Name			
Addition					82 Street Add	dress (P.O. Box Number is Not Acceptab	le)	
I. Pursuant to the provisions of Soctions 607 0502 and 607 1508. Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent. I and accept the obligations of. Section 807 0505, Florida Statutes. SIGNATURE SIGNATURE D OEFICEINS AND DIRECTORS I. OPFICEINS AND DIRECTORS II TITLE OEFICEINS AND DIRECTORS II 11 TITLE II TITLE II II TITLE II II TITLE II			r e		83			
Display the predict prediction again and the Lapendade (NOTE Fragmands required atom relaxation) DATE 12. OFFICE RS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 11.1 DELETE 11.11.11.11.11.11.11.11.11.11.11.11.11.					84 City	·····	85 Zip	Code
Initial D DELETE 11 Tritle 11 Tritle MARE LAZZARA, RICHARD J 13 STREET ADDRESS 12 MWLE 13 STREET ADDRESS STREET ADDRESS 16 907 PALM BEACH LAKES BLVD 13 STREET ADDRESS 14 Others 17 ZP INITE DELETE 21 TITLE Dhange Addition STREET ADDRESS 23 STREET ADDRESS 23 STREET ADDRESS Change Addition STREET ADDRESS 23 STREET ADDRESS Change Addition STREET ADDRESS 24 OFTY-ST-ZP Change Addition STREET ADDRESS 24 OFTY-ST-ZP Change Addition STREET ADDRESS 23 STREET ADDRESS Change Addition STREET ADDRESS 33 STREET ADDRESS Change Addition STREET ADDRESS 33 STREET ADDRESS Change Addition STREET ADDRESS 34 OFTY-ST-ZP Change Addition STREET ADDRESS 35 STREET ADDRESS Change Addition STREET ADDRESS 35 STREET ADDRESS Change Addition STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRE			CO3 0 CO3 0 FOO	1500 51 11 41				
MARE LAZZARA, RICHARD J 1897 PALM BEACH LAKES BLVD 13 STREET ADDRESS OTY ST-2P WEST PALM BEACH FL 33409 Inte DELETE 2 NAME 2 STREET ADDRESS STREET ADDRESS 2 STREET ADDRESS CITY ST-2P Change Addition 2 LOTY-ST-2P Inte DELETE 2 STREET ADDRESS 2 STREET ADDRESS CITY ST-2P Change Inte DELETE STREET ADDRESS 2 STREET ADDRESS CITY ST-2P Change Inte 3 STREET ADDRESS STREET ADDRESS 3 STREET ADDRESS CITY ST -2P Change Inte 2 LOTY-ST -2P Inte 3 STREET ADDRESS STREET ADDRESS 3 STREET ADDRESS CITY ST -2P Change Inte Change Addition KARE STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS Change STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS	SIGNATURE	Signature, typed or protect name of reg-	stered agent and title if ap	opiicable. (NOTE:	Registered Agent signature requ	ulred when reinstating)	DATE	
NAME SIREET ADDRESS CITY-ST-2IP CITHE SIREET ADDRESS CITY-ST-2IP CITHE C		Signature, typed or protect name of reg-	stered agent and title if ap	opiicable. (NOTE DFIS	Registered Agent signature requ 13.	ulred when reinstating)	DATE ERS AND DIRECTOR	
NAME SIREET ADDRESS CITY-ST-2IP CITHE SIREET ADDRESS CITY-ST-2IP CITHE C	SIGNATURE	Signature, typed or period name of reg. OFFICE D LAZZARA, RICHARD J	istered agent and title if at ERS AND DIRECTO	opiicable. (NOTE DFIS	Registered Agent signature requ 13. 1 1 TITLE	ulred when reinstating)	DATE ERS AND DIRECTOR	RS IN 12
STREFT ADDRESS CUY-ST-2P CUY-ST-	SIGNATURE 12. 1011 NAME STREET ADDRESS	Signature, typed or period name of reg. OFFICE D LAZZARA, RICHARD J 1897 PALM BEACH LAH	ERS AND DIRECTO	opiicable. (NOTE DFIS	Registered Agent signature requ 13. 11 TiTLE 1.2 NAME 1.3 STREET ADDRESS	ulred when reinstating)	DATE ERS AND DIRECTOR	RS IN 12
CLIV-SI-2# 2 4 CIV-SI-2# DELETE 31 TITLE OPECT 33 STREET ADDRESS CIV-SI-2P 34 CIV-SI-2P DELETE 31 TITLE DELETE 31 TITLE 32 NAME 33 STREET ADDRESS CIV-SI-2P 34 CIV-SI-2P DELETE 41 TITLE Addition 4 CIV-SI-2P NAME 4 STREET ADDRESS CIV-SI-2P 34 CIV-SI-2P NAME 43 STREET ADDRESS CIV-SI-2P 44 CIV-SI-2P NAME 52 NAME STREET ADDRESS 53 STREET ADDRESS CIV-SI-2P 44 CIV-SI-2P ITILE Change Addition 52 NAME SSTREET ADDRESS 53 STREET ADDRESS CIV-SI-2P 64 CIV-SI-2P ITILE 53 STREET ADDRESS SIREET ADDRESS 53 STREET ADDRESS SIREET ADDRESS 53 STREET ADDRESS CIV-SI-2P Change Addition ITILE SIREET ADDRESS 53 STREET ADDRESS SIREET ADDRESS 53 STREET ADDRESS 53 STREET ADDRESS <tr< td=""><td>SIGNATURE 12. 10114 NAME SIREET ADDRESS CITY-ST-20P 1011E</td><td>Signature, typed or period name of reg. OFFICE D LAZZARA, RICHARD J 1897 PALM BEACH LAH</td><td>ERS AND DIRECTO</td><td>DPIICABLE. (NOTE DRS DELETE</td><td>Registered Agent signature requ 13. 11 TiTLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CiTY - ST - ZiP</td><td>ulred when reinstating)</td><td>DATE ERS AND DIRECTOR Change</td><td>RS IN 12</td></tr<>	SIGNATURE 12. 10114 NAME SIREET ADDRESS CITY-ST-20P 1011E	Signature, typed or period name of reg. OFFICE D LAZZARA, RICHARD J 1897 PALM BEACH LAH	ERS AND DIRECTO	DPIICABLE. (NOTE DRS DELETE	Registered Agent signature requ 13. 11 TiTLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CiTY - ST - ZiP	ulred when reinstating)	DATE ERS AND DIRECTOR Change	RS IN 12
NAME STREET ADDRESS STREET ADDRESS CUTY - ST - ZIP TITLE STREET ADDRESS CUTY - ST - ZIP TITLE DELETE 41 TITLE 41 TITLE 41 TITLE 41 STREET ADDRESS CUTY - ST - ZIP 44 CITY - ST - ZIP 55	SIGNATURE 12. DILE NAME STREET ADORESS CITY-ST-20P TILE NAME	Signature, typed or period name of reg. OFFICE D LAZZARA, RICHARD J 1897 PALM BEACH LAH	ERS AND DIRECTO	DPIICABLE. (NOTE DRS DELETE	Registered Agent signature requ 13. 1 1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2 1 TITLE 2.2 NAME	ulred when reinstating)	DATE ERS AND DIRECTOR Change	RS IN 12
STREET ADDRESS CITY-ST-ZIP TITLE Addition Change Addition Addition Addition Change Addition Change Addition Addition Addition Change Addition Addit	SIGNATURE 12. DILE NAME SIREET ADORESS CITY-ST-2/P TILE NAME SIREET ADORESS CITY-ST-2/P	Signature, typed or period name of reg. OFFICE D LAZZARA, RICHARD J 1897 PALM BEACH LAH	ERS AND DIRECTO	DRS (NOTE	Registered Agent signature requ 13. 1 1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2 1 TITLE 2.2 NAME 2.3 STREET ADDRESS	ulred when reinstating)	DATE ERS AND DIRECTOR Change	RS IN 12
Imple DELETE 41 Title Change Addition NAME 4.2 NAME 4.3 STREET ADDRESS 4.3 STREET ADDRESS STREET ADDRESS 4.4 CitV-ST-ZIP 4.4 CitV-ST-ZIP Imple: Imple: <td>SIGNATURE 12. DITLE NAME STREET ADORESS CITY - ST - ZIP TITLE STREET ADORESS CITY - ST - ZIF TITLE</td> <td>Signature, typed or period name of reg. OFFICE D LAZZARA, RICHARD J 1897 PALM BEACH LAH</td> <td>ERS AND DIRECTO</td> <td>DRS (NOTE</td> <td>Registered Agent signature requ 13. 1 1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2 1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE</td> <td>ulred when reinstating)</td> <td>DATE ERS AND DIRECTOR Change</td> <td>RS IN 12</td>	SIGNATURE 12. DITLE NAME STREET ADORESS CITY - ST - ZIP TITLE STREET ADORESS CITY - ST - ZIF TITLE	Signature, typed or period name of reg. OFFICE D LAZZARA, RICHARD J 1897 PALM BEACH LAH	ERS AND DIRECTO	DRS (NOTE	Registered Agent signature requ 13. 1 1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2 1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE	ulred when reinstating)	DATE ERS AND DIRECTOR Change	RS IN 12
NAME 4.2 NAME STREET ADDRESS 43 STREET ADDRESS C1Y-ST-ZIP 44 CITY-ST-ZIP UTILE DELETE STREET ADDRESS 53 STREET ADDRESS STREET ADDRESS 53 STREET ADDRESS CITY-ST-ZIP Addition STREET ADDRESS 53 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP TITLE Change Addition 52 NAME STREET ADDRESS 53 STREET ADDRESS CITY-ST-ZIP 54 CITY-ST-ZIP TITLE Change Addition 62 NAME STREET ADDRESS 53 STREET ADDRESS STREET ADDRESS 54 CITY-ST-ZIP STREET ADDRESS 54 CITY-ST-ZIP STREET ADDRESS 54 CITY-ST-ZIP STREET ADDRESS 54 C	SIGNATURE 12. DILE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME	Signature, typed or period name of reg. OFFICE D LAZZARA, RICHARD J 1897 PALM BEACH LAH	ERS AND DIRECTO	DRS (NOTE	Registered Agent signature requ 13. 11 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP 3.1 TITLE 3.2 NAME	ulred when reinstating)	DATE ERS AND DIRECTOR Change	RS IN 12
C1Y-ST-ZIP 44 CiTY-ST-ZIP Inite DELETE Street ADDRESS 53 STREET ADDRESS C1Y-ST-ZIP 54 CiTY-ST-ZIP Inite 54 CiTY-ST-ZIP CITY-ST-ZIP 53 STREET ADDRESS STREET ADDRESS -05/19/9701151030C/9 STREET ADDRESS -05/19/9701151030C/9 CITY-ST-ZIP 64 CiTY-ST-ZIP CITY-ST-ZIP 54 CiTY-ST-ZIP CITY-ST-ZIP <td< td=""><td>SIGNATURE 11. 11. 11. 11. 11. 11. 11. 11</td><td>Signature, typed or period name of reg. OFFICE D LAZZARA, RICHARD J 1897 PALM BEACH LAH</td><td>ERS AND DIRECTO</td><td>Opticable. (NOTE DRS DELETE DELETE DELETE DELETE</td><td>Registered Agent signature requ 13. 1 1 TiTLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CiTY - ST - ZiP 2.1 TiTLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CiTY - ST - ZiP 3.1 TiTLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CiTY - ST - ZiP</td><td>ulred when reinstating)</td><td>DATE ERS AND DIRECTOR Change</td><td>RS IN 12</td></td<>	SIGNATURE 11. 11. 11. 11. 11. 11. 11. 11	Signature, typed or period name of reg. OFFICE D LAZZARA, RICHARD J 1897 PALM BEACH LAH	ERS AND DIRECTO	Opticable. (NOTE DRS DELETE DELETE DELETE DELETE	Registered Agent signature requ 13. 1 1 TiTLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CiTY - ST - ZiP 2.1 TiTLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CiTY - ST - ZiP 3.1 TiTLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CiTY - ST - ZiP	ulred when reinstating)	DATE ERS AND DIRECTOR Change	RS IN 12
Inite DELETE 5.1 TITLE Change Addition NAME 5.2 NAME 5.3 STREET ADDRESS 5.3 STREET ADDRESS Change Addition STRET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP Change Addition Inite DELETE 6.1 TITLE Change Addition VAME DELETE 6.1 TITLE Change Addition STREET ADDRESS 5.3 STREET ADDRESS -05/19/9701151030C9 Addition STREET ADDRESS 6.3 STREET ADDRESS -05/19/9701151030C9 ###165.00 5/8/97 City-s1-ZiP 6.4 City-s1-ZiP 8.4 City-s1-ZiP ###165.00 5/8/97 I.4. Lob hereby certify that the information supplied with this thing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on his annual report is true and accurate and them my signature shall have the same legal effect as if made under oath; that i am on officer or direct of line second for trustee emproyering to the recovering of the second for the same does and them my signature shall have the same legal effect as if made under oath; that i am on officer or direct of of the coporation of the report or trustee and them my signature shall have the same legal effect as if made under oath; that i am officer or direct of of the coporation of the report or trustee emproyerate of the statutes; and them yn name	SIGNATURE 12. 1411 NAME SIREET ADORESS CITY-ST-2IP 1411E NAME SIREET ADORESS CITY-ST-2IP 1411E NAME SIREET ADDRESS CITY-ST-2IP 1411E	Signature, typed or period name of reg. OFFICE D LAZZARA, RICHARD J 1897 PALM BEACH LAH	ERS AND DIRECTO	Opticable. (NOTE DRS DELETE DELETE DELETE DELETE	Registered Agent signature requ 13. 1 1 TitLE 12 NAME 1.3 STREET ADDRESS 1.4 CitY-ST-ZIP 2.1 TitLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CitY-ST-ZIP 3.1 TitLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CitY-ST-ZIP 4.1 TITLE	ulred when reinstating)	DATE ERS AND DIRECTOR Change	RS IN 12
STREET ADDRESS CITY-ST-ZIP TITLE STREET ADDRESS STREET ADD	SIGNATURE 12. THE NAME SIREET ADORESS CITY-ST-2IP HILE NAME SIREET ADORESS CITY-ST-2IF TILE NAME SIREET ADDRESS CITY-ST-2IP TILE NAME SIREET ADDRESS	Signature, typed or period name of reg. OFFICE D LAZZARA, RICHARD J 1897 PALM BEACH LAH	ERS AND DIRECTO	Opticable. (NOTE DRS DELETE DELETE DELETE DELETE	Registered Agent signature requ 13. 1 1 Title 1.2 NAME 1.3 STREET ADDRESS 1.4 CitY-ST-ZIP 2.1 Title 2.2 NAME 2.3 STREET ADDRESS 2.4 CitY-ST-ZIP 3.1 Title 3.2 NAME 3.3 STREET ADDRESS 3.4 CitY-ST-ZIP 4.1 Title 4.2 NAME 4.3 STREET ADDRESS	ulred when reinstating)	DATE ERS AND DIRECTOR Change	RS IN 12
CITY-ST-ZIP 5.4 CITY-ST-ZIP TITLE 0 DELETE 6.1 TITLE 6.1 TITLE 6.2 NAME 6.2 NAME 6.3 STREET ADDRESS -05/19/9701151030C9 STREET ADDRESS 6.3 STREET ADDRESS CITY-ST-ZIP 6.4 CITY-ST-ZIP 14. Lob hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this ennual report is true and accurate and them my signature shall have the same legal effect as if made under oath; that i am an officer or direct of of the reported or trustee empowered to trustee empowered to the secure this report as required by Chapter 607. Florida Statutes: and that my name	SIGNATURE 12. THE NAME STREET ADORESS CITY-ST-2IP HILE NAME STREET ADORESS CITY-ST-2IP TILE NAME STREET ADDRESS CITY-ST-2IP TILE NAME STREET ADDRESS C-TY-ST-2IP	Signature, typed or period name of reg. OFFICE D LAZZARA, RICHARD J 1897 PALM BEACH LAH	ERS AND DIRECTO	IPIICABDIO. (NOTE ITS DELETE DELETE DELETE DELETE	Registered Agent signature requ 13. 1 1 TiTLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	ulred when reinstating)	DATE ERS AND DIRECTOR Change Change	Addition
The finite formation indicated on his ennual report or supplemental epodal report is true and ecurate and that my signature shall have the same legal effect as if made under oath; that if an officer or directed of the reported or trustee empowerant of excellent his report as required by Chapter 60, Florida Statutes; and that my name	SIGNATURE IIII IIII NAME SIREET ADORESS CITY - ST - ZIP TITLE NAME SIREET ADORESS CITY - ST - ZIP TITLE NAME SIREET ADDRESS CITY - ST - ZIP TITLE NAME SIREET ADDRESS CITY - ST - ZIP TITLE NAME	Signature, typed or period name of reg. OFFICE D LAZZARA, RICHARD J 1897 PALM BEACH LAH	ERS AND DIRECTO	IPIICABDIO. (NOTE ITS DELETE DELETE DELETE DELETE	Registered Agent signature requ 13. 1 1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP 5.1 TITLE 5.2 NAME	ulred when reinstating)	DATE ERS AND DIRECTOR Change Change	Addition
14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental endeal 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 directed of the corporation of the receiver or trustee empowared to execute this report as required by Chapter 607. Florida Statutes; and that my name	SIGNATURE IIII IIII NAME SIREET ADORESS CITY-ST-ZIP TITLE NAME SIREET ADDRESS CITY-ST-ZIP TITLE NAME SIREET ADDRESS CITY-ST-ZIP TITLE NAME SIREET ADDRESS	Signature, typed or period name of reg. OFFICE D LAZZARA, RICHARD J 1897 PALM BEACH LAH	ERS AND DIRECTO	IPIICABDIO. (NOTE ITS DELETE DELETE DELETE DELETE	Registered Agent signature requ 13. 11 TITLE 12 NAME 1.3 STREET ADDRESS 14 CITY - ST - ZIP 21 TITLE 22 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS	ulred when reinstating)	DATE ERS AND DIRECTOR Change Change	Addition
14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental endeal 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 directed of the corporation of the receiver or trustee empowared to execute this report as required by Chapter 607. Florida Statutes; and that my name	SIGNATURE III. III. NAME SIREET ADORESS CITY - ST - 2IP TITLE NAME SIREET ADORESS CITY - ST - 2IP TITLE NAME SIREET ADDRESS CITY - ST - 2IP TITLE NAME SIREET ADDRESS CITY - ST - 2IP TITLE NAME SIREET ADDRESS CITY - ST - 2IP TITLE	Signature, typed or period name of reg. OFFICE D LAZZARA, RICHARD J 1897 PALM BEACH LAH	ERS AND DIRECTO	ypicable. (NOTE DFIS DELETE DELETE DELETE DELETE DELETE DELETE	Registered Agent signature requ 13. 11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY - ST - ZIP 21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY - ST - ZIP 31 TITLE 32 NAME 33 STREET ADDRESS 34. CITY - ST - ZIP 41 TITLE 4.2 NAME 4.3 STREET ADDRESS 44. CITY - ST - ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP 6.1 TITLE	ulred when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE ERS AND DIRECTOF Change Change Change Change Change Change	RS IN 12
14. I do hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental endeal 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 directed of the corporation of the receiver or trustee empowared to execute this report as required by Chapter 607. Florida Statutes; and that my name	SIGNATURE IIII IIII NAME STREET ADORESS CITY - ST - ZIP TITLE NAME STREET ADORESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS C-TY - ST - ZIP TITLE NAME STREET ADDRESS C-TY - ST - ZIP TITLE NAME STREET ADDRESS C-TY - ST - ZIP TITLE NAME	Signature, typed or period name of reg. OFFICE D LAZZARA, RICHARD J 1897 PALM BEACH LAH	ERS AND DIRECTO	ypicable. (NOTE DFIS DELETE DELETE DELETE DELETE DELETE DELETE	Registered Agent signature requ 13. 1 1 TitLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CitY - ST - ZiP 2.1 TitLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CitY - ST - ZiP 3.1 TitLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CitY - ST - ZiP 4.1 TitLE 4.2 NAME 4.3 STREET ADDRESS 3.4 CitY - ST - ZiP 5.1 TitLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CitY - ST - ZiP 6.1 TitLE 6.2 NAME	ulred when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE ERS AND DIRECTOF Change Change Change Change Change Change	RS IN 12
arriarionicer or director of the corporation of the tecewar or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name	SIGNATURE III. III. NAME STREET ADORESS CITY - ST - 2IP TITLE NAME STREET ADORESS CITY - ST - 2IP TITLE NAME STREET ADDRESS CITY - ST - 2IP	Signature, typed or period name of reg. OFFICE D LAZZARA, RICHARD J 1897 PALM BEACH LAH WEST PALM BEACH FL	KES BLVD 33409	ypicable. (NOTE DELETE DELETE DELETE DELETE DELETE DELETE DELETE DELETE	Registered Agent signature requ 13. 1 1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 CITY - ST - ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP	60000218 -05/19/970115 ***165.00	DATE ERS AND DIRECTOR Change Change Change Change	RS IN 12
	SIGNATURE SIGNATURE 12. TITLE NAME STREET ADORESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE NAME STREET ADDRESS CITY - ST - ZIP TITLE	Signature, typed or period name of reg. OFFICE D LAZZARA, RICHARD J 1897 PALM BEACH LAN WEST PALM BEACH FL	SUPPHICIC with the	pricable. (NOTE PRS DELETE DELETE	Registered Agent signature requ 13. 1 1 TiTLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CiTY - ST - ZiP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CiTY - ST - ZiP 3.1 TiTLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZiP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 CITY - ST - ZiP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZiP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 5.4 CITY - ST - ZiP 6.1 TITLE 6.3 STREET ADDRESS 5.4 CITY - ST - ZiP 6.1 TITLE 6.3 STREET ADDRESS 5.4 CITY - ST - ZiP 6.1 TITLE 6.3 STREET ADDRESS 5.4 CITY - ST - ZiP 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP	BODDO218 Control of the serve large	DATE ERS AND DIRECTOR Change Change Change Change Change Change Change Change Change Change	Addition Addition Addition Addition Addition Addition Addition Addition Addition