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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # P93000055293 (3)

HARTFORD INSTITUTIONAL INVESTORS SERVICE CO. Principal Place of Business Mailing Address					
2310 WHITE MARSH WAY PALM CITY FL 34990 US		P O BOX 829 Palm City Fl 3499 US	0-0629		
00		US		3. Date Incorporated or Qualified 08/05/1993	3a. Date of Last Report 08/02/1995
2. Principal Pla	ice of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		06-1233653	Not Applicable
Suite, Apt #	F, e tc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zφ	Country	Zip	Country	8. This corporation has liability for inte	······································
24	25	29	30	Florida Statutes 🔀 Yes	
	9. Name and Address of	Current Registered Agent		10. Name and Address of New Reg	Istered Agent
			81 Name		
GIRARD,			82 Street Add	lress (P.O. Box Number is Not Acceptable)	1
	HITEMARSH WAY		83		
PALM U	TY FL 34990		03		
			84 City		85 Zip Code
11. Pursuant to	a the provisions of Sections 60	07 0502 and 607 1508. Florida Stat	utes the above-pamed corpo	pration submits this statement for the purpo	FL S E P C C C C C C C C C
or registere	ed agent, or both, in the State	of Florida, Sunh change w 3 author	rized by the corporation's boa	ard of directors. I hereby accept the appoin	itment as registered agent. I am
	יו ביוועט א ור ווועט אור וווועט אור וווועט.	Ji, Sect. 📉 - Jour, fiuria siatur	. U \$.		
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SIGNATURE	Stylich i sy i in protect name of i g OFFICEI D	ज्ञान कारीसल है बेड्सान्बर (RS AND DIRECTORS	(NOTE Registered Agent's gnature require	ed when remstating)	DATE
SIGNATURE 12. TITLE NAME	OFFICE D BARNES-GIRARD, JOAN	JOSE AND DIRECTORS DELETE NNE C	(NO?). Registered Agent's gnature require	ed when remstating)	DATE PROPERTY OF THE PROPERTY
SIGNATURE . 12. TITLE NAME STHEET ADDRESS	OFFICE D BARNES-GIRARD, JOAN 2310 WHITEMARSH WA	JOSE AND DIRECTORS DELETE NNE C	(NOTE Registered Agent's ynature require 13. 1 1 TITLE	ed when remstating)	DATE PROPERTY OF THE PROPERTY
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SIGNATURE: SIGNATURE AND TYPE OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR JUSTIANA A/28/96 8W-433-17/

DOE024 (19/05)