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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUN 1. Corporation	MENT # P930	00058276 (5)			
.,,	& MOUNTBATTEN LTD	, INC.			
Principal Place	of Business	Mailing Address		T INTRIBUDI AND IDADE HAMA BURK DRAW	DB301 BD184 B0101 E8138 41081 40910 B011 1091
21301 POWERLINE ROAD 21301 POWER LINE ROAD			AD		
#309 #309					
BOCA RATON FL 33433-2391 US		BOCA RATON FL 33433-2391 US		3. Date Incorporated or Qualified 08/19/1993	3a. Date of Las Report 05/01/1995
2. Principal Pla	ice of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26 Suite, Apt. #, etc.		11-3124920	Not Applicable \$8.75 Additional
Suite, Apt. #, etc.		27		5. Certificate of Status Desired	Frie Required
City & State		City & State		Election Campaign Financing Trust Fund Contribution	S5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for	intangible tax under s. 199.032,
24	25	29	30	Florida Statutes Yes 10. Name and Address of New F	No No
	g. Name and Address of Cu	rrent Registered Agent	81 Name	10. Name and Address of New P	
\ \(\)	NODATE OFFICE NO		'	Paul W. Gardy	O MESION
XL CORP	XL CORPORATE SERVICES, INC.			ress (P.O. Box Number is Not Acceptate	34 KO#309
	354 OFFICE PLAZA MAGNOLIA OFFICE CENTER			n RATE I	22432-2291
TAIL AHA	FALLAHASSEE FL 32301			004 154 10N, 11	85 Zip Code
			84 City		FL `
11. Pursuant to	o the provisions of Sections 607.	0502 and 607.1508, Florida Statuk Florida. Such change was dyby Sedyon 607.0505, Jorida Statutes	os, venbove named corpo	oration submits this statement for the pu ord of directors. I hereby accept the app	rpose of changing its registered office of the continuent as registered agent. I am
familiar wit	th, and accept the bigations of	Sedvon 607.0505, lorid: Statities	1/2 / 12) (AROUS INC	N Ulirles
SIGNATURE .	Sunature, typed or plinted name of registered	specificated little if any cable: PNO	Té. Registered Agent signature require	ed which reinstative	DATE
12.		S AND DIRECTORS	13.		ICERS AND DIRECTORS IN 12
TITLE	D	DELETE	1. 1 TITLE	PRESIDENT & DIN	Change Addition
NAME	GARDYN, PAUL W		1.2 NAME		•
STREET ADDRESS	21301 POWERLINE ROAD), suite 309	13 STREET ADDRESS		
CITY - ST - ZIP	BOCA RATON FL	[7] DELETE	14 CHY-ST-ZIP		Change Addition
TITLE			2 1 TITLE 22 NAME		
NAMÉ			2.3 STREET ADDRESS		
STREET ADDRESS			2.4 CiTY-ST-ZIP		
CITY-ST-ZIP THILE		☐ DELETE	3.1 TITLE		Charge Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
C(1Y - ST - ZIF			3 4 CITY-ST-ZIP		
TITLE		DELETE	4 1 TITLE		Charge Addition
NAME			4 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
C+TY - ST - ZIP		DELETE	4.4 CITY - ST - ZIP		Charige Addition
TITLE			5. 1 TITLE 5.2 NAME		
NAME CASSEST ADDRESS			5.3 STREET ADDRESS		
STREET ADDRESS			5 4 CHTY-ST-ZIP		
CITY-S1-ZIP TITLE	 	DELETE	6 1 TITLE		Change Addition

14. If do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and occurate and that my signature shall have the same legal effect as if made under certify that I am an officer or director of the corporation or the receiver or trusted empowered to exclute this report agreed by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 in changed or on an attachnish) with an address.

6.2 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

SIGNATURE:

NAME

STREET ADDRESS

City-St-ZP