ANNU	ILE NOW: FILI PROFIT RPORATION JAL REPORT 1997		FLORIDA DEPAR Sandra B . Secretar	DOULUU IMENT OF STATE Mortham y of State ORPORATIONS	Feb 05 1	ILED 1997 8:(ary of S	
DOCU 1. Corporatio		930000580 ompany, inc.	670 (9)			2	
Principal Plac 6231 NW 4TH BOCA RATON US	AVE	6231	ng Address NW 4TH AVE. RATON FL 33487-29)7	3. Date Incorporated or Qualified	3a. Date of Last Re	
21	lace of Business	26	ailing Address		08/18/1993 4. FEI Number 65-0438651	Not	blied For Applicable
Suite, Apt 22 City & Stale		27 Ci	pite, Apt. #, etc. ty & State		 Certificate of Status Desired Election Campaign Financing 	\$8.75 A Fee Rec \$5.00 F	quired May Be
23 Zip 24	Country 25	28 y Zij 29 ss of Current Registere	ŕ	Country 30	Trust Fund Contribution B. This corporation has liability for Florida Statutes 10. Name and Address of New Re	Yes 🔽 No	
-1300 - 67E	Donald, David M- 3 Southwest First . 200 - Mi Fl-33135.	i stree t		81 Name 82 Street Add 83	ress (P.O. Bex Number is Not Acceptal 31 N.W. Hug	ble)	
OIDCE OF I	to the provisions of Sect egistered agont of Sect	ions 607.0502 and 607.	1508, Florida Statute Such change was a	s, the above-named con	poration submits this statement for the p tion's board of directors. I hereby acce	FL 85 33 purpose of changing its pt the appointment as re	registered
agent. N	egistered a ton y bon m familiar with ban act	i, in the case of Fiorida. apt the physicane of, Se recision along and life if ap	Such change was a action 607.0505, Flo 	s, the above-named corr thorized by the corpora ida Statutes.	poration submits this statement for the tion's board of directors. I hereby acce red when reinstating)	FL 331 purpose of changing its pt the appointment as response - - 29.93 DATE	registered egistered
SIGNATURE X 12. 111LE NAME STREET ADDRESS	S guarder ben de primet no S guarder benn de primet no O D MOORE, TIM 6231 NW 4TH AVE	FFICERS AND DIRECTO	Such change was a action 607.0505, Flo 	s, the above-named corr uthorized by the corpora- rida Statutes. Registered Agent signature requinant 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	poration submits this statement for the tion's board of directors. I hereby acce	FL 331 purpose of changing its pt the appointment as response - - 29.93 DATE	registered egistered S IN 12 Addition
SIGNATURE ¥ 12. 111LE NAME STREET ADDRESS CITY-ST-ZIP 11TLF NAME STREET ADDRESS	D MOORE, TIM 6231 NW 4TH AVE BOCA RATON FL VP MOORE JACKIE 6231 NW 4TH AVE	ept the role of Fiorica.	Such change was a ection 607.0505, Flo Preside (NOTE	S, the above-named con uthorized by the corpora- rida Statutes. Registered Agent signature requi- 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	poration submits this statement for the tion's board of directors. I hereby acce red when reinstating)	FL 331 purpose of changing its pt the appointment as re- DATE 331 DATE 331	registered egistered S IN 12 Addition
SIGNATURE X SIGNATURE X 112. 117LE NAME STREET ADDRESS CITY-ST-ZIP 117LF NAME STREET ADDRESS CITY-ST-ZIP 117LE NAME STREET ADDRESS	D MOORE, TIM 6231 NW 4TH AVE BOCA RATON FL VP MOORE JACKIE	ept the role of Fiorica.	Such change was a action 607 0505, File Content plicable (NOTE INS	s, the above-named corr thorized by the corpora- rida Statutes. Registered Agent signature requi- 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	poration submits this statement for the tion's board of directors. I hereby acce red when reinstating)	FL 331 purpose of changing its pt the appointment as re DATE CERS AND DIRECTORS CERS AND DIRECTORS	registered egistered S IN 12 Addition
SIGNATURE ¥ 12. 11TLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP 11TLE NAME STREET ADDRESS CITY-ST-ZIP	D MOORE, TIM 6231 NW 4TH AVE BOCA RATON FL VP MOORE JACKIE 6231 NW 4TH AVE	ept the role of Fiorica.	Such change was a ection 607 0505, Flo metable (NOTE PRS	S, the above-named corr uthorized by the corpora- ida Statutes. Registered Agent signature requi- 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	poration submits this statement for the tion's board of directors. I hereby acce red when reinstating)	FL 331 purpose of changing its pt the appointment as re- DATE CARS AND DIRECTORS CERS AND DIRECTORS Change	Addition
SIGNATURE ¥ 12. 111LE NAME STREET ADDRESS CITY - ST - ZIP 11TLF NAME STREET ADDRESS CITY - ST - ZIP 11TLE NAME STREET ADDRESS CITY - ST - ZIP 11TLE NAME STREET ADDRESS CITY - ST - ZIP 11TLE NAME STREET ADDRESS	D MOORE, TIM 6231 NW 4TH AVE BOCA RATON FL VP MOORE JACKIE 6231 NW 4TH AVE	ept the role of Fiorica.	SUCH CHANGE WAS A ection 607 0505, Fio preable (NOTE PRS DELETE	Statutes Statutes Progistered Agent signature required 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 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 4.4 CITY-ST-ZIP 5.1 STREET ADDRESS	poration submits this statement for the tion's board of directors. I hereby acce red when reinstating)	FL 331 purpose of changing its pt the appointment as re- DATE CERS AND DIRECTORS CERS AND DIRECTORS Change Change	Addition
Agent A Agent A Agent A SIGNATURE Y 1112 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	D MOORE, TIM 6231 NW 4TH AVE BOCA RATON FL VP MOORE JACKIE 6231 NW 4TH AVE	ept the role of Fiorica.	SUCH CHANGE WAS A cotion 607.0505, Fio PRS DELETE DELETE DELETE DELETE	S, the above-named corr uthorized by the corpora- rida Statutes. 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	poration submits this statement for the tion's board of directors. I hereby acce red when reinstating)	FL 331 purpose of changing its pt the appointment as re- DATE CERS AND DIRECTORS CRS AND DIRECTORS Change Change Change	Addition