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	
DOCI	BALLAIT	11

1. Corporation	MENT# P930(AIS, INC.	00060132 (6)		
Principal Place of Business Mailing Address 461 E. PALMETTO PARK ROAD BOCA RATON FL 33432 ROCA RATON FL 33422			4 I BERNOER IND I DIDDE RIVIN BERNE BERN	I ODIAL ODIAL BYINI QUIDI IIQOD OJAJO JIJA ARDI	
book narol	11 12 35732	BOCA RATON FL 33	432	Date Incorporated or Qualified 08/23/1993	3a. Date of Last Report 04/18/1995
	ace of Business	2a. Mailing Address		4. FEI Numitier	Applied For
21	4 - 2 -	26	· · · · · · · · · · · · · · · · · · ·	65-0429321	Not Applicable
Suite, Apt.:	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State		City & State		6. Election Campaign Financing	Fee Required \$5.00 May Be
23	······································	28		Trust Fund Contribution	Added to Fees
Zip 24	Country	Zιρ	Country	8. This corporation has liability for	
24	25 9. Name and Address of Curre	29 29 Agent	30	Florida Statutes Yes 10. Name and Address of New F	No
***************************************			81 Name	TO, Name and Address of New F	registered Agent
ROELLY,	, GERARD YVES		82 Street Add	iress (P.O. Box Number is Not Acceptat	alot
	PALMETTO PARK ROAD		Stiest Auc		леј
BOCA R	ATON FL 33432		83		
	and the second)	84 City		■■ 85 Zip Code
11. Pursuant to	o the provisions of Sections 607 050	2 and 607 1508 Florida State	ites the above paged cores	votion admile this states set for the	
or registere familiar wit	ed agent, or both, in the State of Flo	rida. Such change was author	ized by the corporation's bos	oration submits this statement for the puract of directors. Thereby accept the app	pose of changing its registered office ointment as registered agent. I am
SIGNATURE	X) Olog 2000, Florida Statute	35.	3	11- 96
			NO°E Registered Agent signature require	ed when remitating)	DAIL
12.	OFFICERS AI	ND DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFF	
NAME	ROELLY, GERARD	[_] DECEN	1 1 TITLE 12 NAME		Change 🔲 Addition
STREET ADDRESS	3154 LEEWOOD TERR		1.3 STREET ADDRESS	78 LARAIT CIRCLE	
C(TY-ST-ZIP	BOCA RATON FL		1.4 CITY: ST-ZIP	BOLA RATION, FL 3	3487
TIFLE	V	☐ DELETE	. 2 1 TITLE		Change Addition
NAME CYCLU ADSOCIO	GONZALEZ, MARY K 3154 LEEWOOD TERR		2.2 NAME	25 / 2000 0	•
STREET ADDRESS CITY-S1-ZIP	BOCA RATON FL			78 LAKAIT CIRCLE	
TITLE	DODA TOTAL	DELETE	2.4 City-S1-ZiP 3.1 TitlE	Bor. : RALL . 1 L 33	Change Addition
NAME		_	3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
C(1Y+ST-ZIP		P Reserve	3 4 CITY - S1 - 2IP		
TITLE		☐ DELETE	4. 1 THLE		Change Addition
NAME STREET ADDRESS			4.2 NAME		
CITY-ST-ZIP			4.3 STREET ADDRESS 4.4 CITY - ST - ZIP		
THILE		☐ DELETE	5 1 TITLE		Change Addition
NAME			5.2 NAME		
STREFT ADDRESS			5 3 STREET ADDRESS		
CITY-ST-ZIP		Fin no rec	5.4 C(TY - S1 - 2IP		
TITLE NAME		☐ DELETE	6.1 TULE		Change Addition
STREET ADDRESS			6.2 NAME 6.3 STREET ADDRESS		
CITY-ST-ZIP			6 4 CITY - ST - ZiP		
14. I do hereby	certify that the information supplied	with this filing is voluntarily fur	nished and does not qualify for	or the exemption stated in Section 119.0	07(3)(k), Florida Statutes. I further
oam, maci	ani an onicer or pirector of the corpo	oration or the receiver or truste	de empowered to execute this	the exemplicit stated in Section 119.0 the and that my signature shall have the t s report as required by Chapter 607, Flo	same legal effect as if made under rida Statutes; and that my name
	Block 12 ox Block 13 if changed, or	on an allagniment with an add	II ESS.	9 11	0/
SIGNATI	URE: AGNATURE AND TYPED O	R PRINTED NAME OF SIGNING OFFICE	ER OR DIRECTOR	3. //-	Castrue Priorie #