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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

P93000069897 (5)

DOCUMENT #

THE IV OF US, INC.

1116-14	0, 00, 110.				
Principal Place	of Business	Mailing Address		1 (\$8)(\$3) HID 10(\$1 (\$1) (\$1) 3841	ADER BRIED SIELD INTEL INTO JULIE 1994 JUNE
5310 NW 33RD AVE SUITE 100 FT LAUDERDALE FL 33309		5310 NW 33RD AVE SUITE 100 FT LAUDERDALE FL 33309			
FT DAUGERO	WILE FL 33309	FI LAUDENDALE FL	33309	<ol> <li>Date Incorporated or Qualified 10/04/1993</li> </ol>	3a. Date of Last Report 06/26/1995
2. Principal Pla	ice of Business	2a. Mailing Address		4. FEI Number	Applied For
21		26		65-0455979	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc		<ol><li>Certificate of Status Desired</li></ol>	S8.75 Additional Fee Required
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zφ	Country	8. This corporation has liability for	
24	25	29	30		□No
	9. Name and Address of Currer	nt Registered Agent		10. Name and Address of New F	
			81 Name	HLLAN SE	C (+A-7
LAÑE, P			82 Street Add	ress (P.O. Box Number is Not Acceptat	11et 2 2 rd Are
	W 33RD AVE #100		83	2010 64	<u> </u>
FT LAUI	DERDALE FL 33309		<u> </u>	Te 110	
			84 City	T LANDERDME F	L FL 85 2833539
11 Pursuant to	a the provisions of Sections 607.050	2 and 607,1508, Florida Stal	utes, the above named corpo	visition submits this statement for the nu	rpose of changing its registered office
1 or register	ed agent, or both, in the State of Flori th, and accept the obligations of, Sec	ida. Such obande was autho	rized by the corporation's boa	and of directors. Thereby accept the app	ointment as registerett agent. I am
	All	fa	ASHE	CANT	8/1/96
SIGNATURE _	Signature Typed or printed name of region and admi-	Fand title Falls au	NOTE. Pagatered Agent signature redor		DATE
12.	<u>-</u>	ID DIRECTORS  DELETE	13.	ADDITIONS/CHANGES TO OFF	CREAS AND DIRECTORS IN 12
TITLE	D COAY LANCE	[] bettie	1 1 TITLE 12 NAME		C Overlage C victoria
NAME DEDICATE ADDRESS	GRAY, LANCE 5310 NW 33RD AVE #100		1.3 STREET AUDRESS		
STREET ADDRESS CITY-ST-ZIP	FT LAUDERDALE FL 33309		14 CHY-ST-ZIP		
TITLE	D	☐ DELETE	2 1 TITLE		Change Addition
NAME	GRAY, ASHLEY		2.2 NAME		
STREET ADDRESS	5310 NW 33RD AVE #100		2.3 STREET ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE FL 33309		2.4 C(TY - ST, Z)P		
THLE		☐ DELETÉ	3 1 TITLE		Change Addition
NAME.			3 2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS	3000018	20083
CITY-ST-ZIP		☐ DELETE	3 4 CITY - ST - ZIP 4, 1 TITLE	3000018 	□45□3 □ Change □ Add tion
NAME		[	4.2 NAME	***200.00	
STREET ADDRESS			4.3 STREET ADDRESS		
CITY - \$1 - ZIP			4.4 CIFY - ST - ZiP		9
TITLE		☐ DELETE	5 1 TITLE		Change Addition
NAME			5.2 NAME		<del>'</del>
STREET ADDRESS			5 3 STREET ADDRESS		£۲,
CITY-ST-ZIF			5 4 CHY - ST - ZIF		Change Addition
TITLE		☐ DELETE	6 1 TIFLE		Change Addition
NAME .			6.2 NAME		
STREET ADDRESS	1		6.3 STREET ADDRESS		

6.4 CITY - ST-7IP

SIGNATURE:

STREET ADDRESS

64.07-51-2P

14. I 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 accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the exportation or the receiver or trusted empowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in Block 13 in thangit for on an attachment with an address.