## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

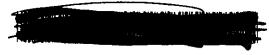
Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT # P930000 70377(4)

ROUSOULLIS - PAPPOU, INC

SIGNATURE:

## **FILED** May 06 1998 8:00am Secretary of State



CHRIST PAPPOU 4/22/98 954-561-2518

| r micipal risc                                                                                                                                                                                                                                                                                                                                                                                                              |                          |                       |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
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|                                                                                                                                                                                                                                                                                                                                                                                                                             | AND PARK BLVD            |                       | 820 W OAKLAND PAR              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| FT LAUDERDA                                                                                                                                                                                                                                                                                                                                                                                                                 | ALE FL 33311             |                       | FY LAUDERDALE FL 3             | 3311                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | DO NOT WRITE IN THIS                                                                                                                                                                                                      | R SPACE                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
|                                                                                                                                                                                                                                                                                                                                                                                                                             |                          |                       |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 3. Date Incorporated or Qualified                                                                                                                                                                                         | 3 dr AQL                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
|                                                                                                                                                                                                                                                                                                                                                                                                                             |                          |                       |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 10/11/93                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| 2. Principal P                                                                                                                                                                                                                                                                                                                                                                                                              | face of Business         |                       | 2a. Mailing Address            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 4. FFI Number                                                                                                                                                                                                             | Applied For                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
|                                                                                                                                                                                                                                                                                                                                                                                                                             |                          | 40 ST                 | <u> </u>                       | JE 40ST                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 65-044 1650                                                                                                                                                                                                               | Not Applicable                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| Suite, Apt                                                                                                                                                                                                                                                                                                                                                                                                                  |                          | 70 51                 | Suite, Apt. #, etc.            | 16 4031                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                           | \$8.75 Additional                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
|                                                                                                                                                                                                                                                                                                                                                                                                                             |                          | erd Ale Fl            |                                | DORNAILE F                                                                                                                                                                                                                                                                                                                                                                                                                                                                         | 5. Certificate of Status Desired                                                                                                                                                                                          | Fee Required                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| City & State                                                                                                                                                                                                                                                                                                                                                                                                                | e                        |                       | City & State                   | /                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  | 6. Election Campaign Financing                                                                                                                                                                                            | \$5.00 May Be                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
| 3 333                                                                                                                                                                                                                                                                                                                                                                                                                       | ,                        |                       | 28 33308                       |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | Trust Fund Contribution                                                                                                                                                                                                   | Added to Fees                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
| Zip                                                                                                                                                                                                                                                                                                                                                                                                                         |                          | Country               | Zip                            | Country                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | 8. This corporation owes or has paid the ci                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| 4                                                                                                                                                                                                                                                                                                                                                                                                                           | 25                       | USA                   | 29                             | 30 USA                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Personal Property Tax due June 30.                                                                                                                                                                                        | Yes No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                         |
| <del>,</del>                                                                                                                                                                                                                                                                                                                                                                                                                | 9. Name and              | Address of Curren     | t Registered Agent             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 10. Name and Address of New Registered                                                                                                                                                                                    | d Agent                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| PA                                                                                                                                                                                                                                                                                                                                                                                                                          | PPOU CHRIST              |                       |                                | 81 Name                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | PAPPOU CHRIST                                                                                                                                                                                                             |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|                                                                                                                                                                                                                                                                                                                                                                                                                             |                          | IND PARK BLVD         |                                | 82 Street Ad                                                                                                                                                                                                                                                                                                                                                                                                                                                                       | ddress (P.O. Box Number is Not Acceptable)                                                                                                                                                                                | gg alvings. Ell a travelle libralità                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |
|                                                                                                                                                                                                                                                                                                                                                                                                                             | LAUDERDALE.              |                       |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    | 3209 N. E 40 ST                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|                                                                                                                                                                                                                                                                                                                                                                                                                             | 311                      |                       |                                | 83                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| •                                                                                                                                                                                                                                                                                                                                                                                                                           | <b>711</b>               |                       |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|                                                                                                                                                                                                                                                                                                                                                                                                                             |                          |                       |                                | 84 City                                                                                                                                                                                                                                                                                                                                                                                                                                                                            | FT. LAUDERNALE F                                                                                                                                                                                                          | L 85 Zip Corie                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 |
| ₹€ Purcuont                                                                                                                                                                                                                                                                                                                                                                                                                 | to the provisions        | of Sections 607 050   | 2 and 607 1508 Florida Sta     | tutes, the above-named or                                                                                                                                                                                                                                                                                                                                                                                                                                                          | propertion submits this statement for the purpose                                                                                                                                                                         | ol changing de registerers                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| office or re                                                                                                                                                                                                                                                                                                                                                                                                                | egistered agent.         | or both, in the State | of Florida, Such change wa     | s authorized by the corpo                                                                                                                                                                                                                                                                                                                                                                                                                                                          | cration's board of directors. Thereby accept the ap                                                                                                                                                                       | pointment as registered                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |
| agent. La                                                                                                                                                                                                                                                                                                                                                                                                                   | mīfamiliar with, a       | nd accept the obliga  | ations of, Section 607.0505.   | Florida Statutes                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| SIGNATURE                                                                                                                                                                                                                                                                                                                                                                                                                   |                          |                       |                                | OTE Registered Agent signature re                                                                                                                                                                                                                                                                                                                                                                                                                                                  | + 4 × 1                                                                                                                                                                                                                   |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| OLCH COLF                                                                                                                                                                                                                                                                                                                                                                                                                   |                          |                       |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|                                                                                                                                                                                                                                                                                                                                                                                                                             | Signature, typed or pri  |                       |                                |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                           | NO DIRECTORS IN 12                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
| 12.                                                                                                                                                                                                                                                                                                                                                                                                                         | Signature, typed or \$10 | OFFICERS AN           | D DIRECTORS                    | 13.                                                                                                                                                                                                                                                                                                                                                                                                                                                                                | ADDITIONS/CHANGES TO OFFICERS AN                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| <b>12.</b><br>Title                                                                                                                                                                                                                                                                                                                                                                                                         | Signature, typed or grit |                       |                                | 13.<br>1.1 TITLE                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | ADDITIONS/CHANGES TO OFFICERS AN                                                                                                                                                                                          |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| 12.<br>TITLE                                                                                                                                                                                                                                                                                                                                                                                                                |                          |                       | D DIRECTORS                    | 13.<br>1.1 TITLE<br>1.2 NAME                                                                                                                                                                                                                                                                                                                                                                                                                                                       | ADDITIONS/CHANGES TO OFFICERS AND THEPPOUR CHRIST                                                                                                                                                                         |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| 12.<br>TITLE<br>NAME<br>STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                      | Signature, typed or pri  |                       | D DIRECTORS                    | 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                                                                          | ADDITIONS/CHANGES TO OFFICERS AND PHAPPOUR CHRIST 3209 NE 405T                                                                                                                                                            | E Change Addition                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                                   |                          |                       | O DIRECTORS                    | 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 DEY-ST-ZP                                                                                                                                                                                                                                                                                                                                                                                                                            | ADDITIONS/CHANGES TO OFFICERS AND P PAPPOU CHRIST 3209 NE 40 ST FT. LAUDERSAME FL 33                                                                                                                                      | ☐ Change ☐ Addition                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| 12. TITLE NAME STREET ADDRESS CHY-SI-ZIP TITLE                                                                                                                                                                                                                                                                                                                                                                              |                          |                       | D DIRECTORS                    | 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 DTY-ST-2P 2.1 TITLE                                                                                                                                                                                                                                                                                                                                                                                                                  | ADDITIONS/CHANGES TO OFFICERS AND PAPPOU CHRIST 3209 NE 40 ST FT. LAUDERSAME FL 33 V.P.                                                                                                                                   | Change Addition                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
| 12. TITLE NAME STREET ADDRESS CHY-SI-ZIP TITLE                                                                                                                                                                                                                                                                                                                                                                              |                          |                       | O DIRECTORS                    | 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 DTY-ST-2P 2.1 TITLE 2.2 NAME                                                                                                                                                                                                                                                                                                                                                                                                         | ADDITIONS/CHANGES TO OFFICERS AND PHPPOU CHRIST 3209 NE 40 ST FT. LAUDERSAME FL 33 V.P. ROUSBULIS CHRIS                                                                                                                   | H Change Addition                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |
| 12.  TITLE  NAME  STREET ADDRESS  CATY-SI-ZIP  TITLE  NAME                                                                                                                                                                                                                                                                                                                                                                  |                          |                       | O DIRECTORS                    | 13.  1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 DEY-ST-ZIP 2.1 TITLE 22 NAME 2.3 STREET ADDRESS                                                                                                                                                                                                                                                                                                                                                                                      | ADDITIONS/CHANGES TO OFFICERS AND P PAPPOUL CHRIST 3209 NE 40 ST FT. LAUDERSAME FL 33 V.P. ROUSBULIS, CHRIS 3209 N.E 40 ST                                                                                                | 308 Addition                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   |
| 12.  TITLE  NAME  STREET ADDRESS  CITY-S1-ZIP  TITLE  NAME  STREET ADDRESS  CITY-S7-ZIP                                                                                                                                                                                                                                                                                                                                     |                          |                       | O DIRECTORS  DELETE  DELETE    | 13.  1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 DEY-ST-ZIP 2.1 TITLE 22 NAME 23 STREET ADDRESS 2.4 GITY-ST-ZIP                                                                                                                                                                                                                                                                                                                                                                       | ADDITIONS/CHANGES TO OFFICERS AND P PAPPOU CHRIST 3209 NE 40 ST FT. LAUDORDIALE FL 33 V.P. ROUSBULIS, CHRIS 3209 N.E 40 ST ET LAUDORDIALE FL                                                                              | 308 Addition  308 Addition                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |
| 12.  TITLE  NAME  STREET ADDRESS  CITY-S1-ZIP  TITLE  NAME  STREET ADDRESS  CITY-S7-ZIP                                                                                                                                                                                                                                                                                                                                     |                          |                       | O DIRECTORS                    | 13.  1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 22 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE                                                                                                                                                                                                                                                                                                                                                           | ADDITIONS/CHANGES TO OFFICERS AND P PAPPOU CHRIST 3209 NE 40 ST FT. LAUDERSAIR FL 33 V.P. ROUSBULIS, CHRIS 3209 N.E 46 ST FT LAUDERSAIR FL SIT                                                                            | 308 Addition  Change Addition                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |
| 12.  TITLE  NAME  STREET ADDRESS  CHY-SI-ZIP  TITLE  NAME  STREET ADDRESS  GIY-ST-ZIP  TITLE                                                                                                                                                                                                                                                                                                                                |                          |                       | O DIRECTORS  DELETE  DELETE    | 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                                                                                                                                                                                                                                                                                                                                       | ADDITIONS/CHANGES TO OFFICERS AND P PAPPOU CHRIST 3209 NE 40 ST FT. LAUDERSHIE FL 33 V.P. ROUSBULIS, CHRIS 3209 N.E 46 ST FT LAUDERSHIE FL SIT PAPPOU, ANDREA                                                             | 308'   Change   Addition   Addition                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| 12.  TITLE  NAME  STREET ADDRESS  CHY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CHY-ST-ZIP  TITLE  NAME                                                                                                                                                                                                                                                                                                                          |                          |                       | O DIRECTORS  DELETE  DELETE    | 13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CTY - 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                                                                                                                                                                                                                                                                                                              | ADDITIONS/CHANGES TO OFFICERS AND P PAPPOU CHRIST 3209 NE 40 ST FT. LAUDERSAIR FL 33 V.P. ROUSBULIS, CHRIS 3209 N.E 40 ST FT LAUDERSAIR FL SIT PAPPOU, ANDREA 3209 NE 40 ST                                               | 308 Addition  Change Addition  Change Addition  Addition                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
| 12.  TITLE  NAME  STREET ADDRESS  CATY-SI-ZIP  TITLE  NAME  STREET ADDRESS  GIY-ST-ZIP  TITLE  NAME  STREET ADDRESS  GIY-ST-ZIP  TITLE  NAME  STREET ADDRESS                                                                                                                                                                                                                                                                |                          |                       | O DIRECTORS  DELETE  DELETE    | 13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CTY-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                                                                                                                                                                                                                                                                                                   | ADDITIONS/CHANGES TO OFFICERS AND P PAPPOU CHRIST 3209 NE 40 ST FT. LAUDERSHIE FL 33 V.P. ROUSBULIS, CHRIS 3209 N.E 46 ST FT LAUDERSHIE FL SIT PAPPOU, ANDREA                                                             | H Change   Addition                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| 12.  TITLE  NAME  STREET ADDRESS  CATY-ST-ZIP  TATLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TATLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TATLE  STREET ADDRESS  CITY-ST-ZIP                                                                                                                                                                                                                                                       |                          |                       | O DIRECTORS  DELETE  DELETE    | 13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CTY - 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                                                                                                                                                                                                                                                                                                              | ADDITIONS/CHANGES TO OFFICERS AND P PAPPOU CHRIST 3209 NE 40 ST FT. LAUDERSAIR FL 33 V.P. ROUSBULIS, CHRIS 3209 N.E 40 ST FT LAUDERSAIR FL SIT PAPPOU, ANDREA 3209 NE 40 ST                                               | H Change   Addition                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| 12.  TITLE  NAME  STREET ADDRESS  CITY-S1-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  TITLE  TITLE  TITLE  TITLE  TITLE                                                                                                                                                                                                                                                 |                          |                       | O DIRECTORS  DELETE  DELETE    | 13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CTY-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                                                                                                                                                                                                                                                                                                   | ADDITIONS/CHANGES TO OFFICERS AND P PAPPOU CHRIST 3209 NE 40 ST FT. LAUDERSAIR FL 33 V.P. ROUSBULIS, CHRIS 3209 N.E 40 ST FT LAUDERSAIR FL SIT PAPPOU, ANDREA 3209 NE 40 ST                                               | H Change   Addition                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| 12.  TITLE  NAME  STREET ADDRESS  CHY-SI-ZIP  TITLE  NAME  STREET ADDRESS  CHY-ST-ZIP  TITLE  NAME  STREET ADDRESS  CHY-SI-ZIP  TITLE  NAME                                                                                                                                                                                                                                                                                 |                          |                       | O DIRECTORS  DELETE  DELETE    | 13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 DTY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 GTY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4 CHY-ST-ZIP  4.1 TITLE                                                                                                                                                                                                                                                                                          | ADDITIONS/CHANGES TO OFFICERS AND P PAPPOU CHRIST 3209 NE 40 ST FT. LAUDERSAIR FL 33 V.P. ROUSBULIS, CHRIS 3209 N.E 40 ST FT LAUDERSAIR FL SIT PAPPOU, ANDREA 3209 NE 40 ST                                               | H Change   Addition                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |
| 12.  TITLE  NAME  STREET ADDRESS  CITY-\$1-ZIP  TITLE  NAME  STREET ADDRESS  CITY-5T-ZIP  TITLE  NAME  STREET ADDRESS  CITY-5T-ZIP  TITLE  NAME  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS  STREET ADDRESS                                                                                                                                                                                             |                          |                       | O DIRECTORS  DELETE  DELETE    | 13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CMY-ST-ZMP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CMY-ST-ZMP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4 CMY-ST-ZMP  4.1 TITLE  4.2 NAME  4.3 STREET ADDRESS  4.4 CMY-ST-ZMP  4.1 STREET ADDRESS  4.4 CMY-ST-ZMP                                                                                                                                                                                                        | ADDITIONS/CHANGES TO OFFICERS AND P PAPPOU CHRIST 3209 NE 40 ST FT. LAUDERSAIR FL 33 V.P. ROUSBULIS, CHRIS 3209 N.E 40 ST FT LAUDERSAIR FL SIT PAPPOU, ANDREA 3209 NE 40 ST                                               | Change   Addition   308   Addition   Addit   |
| 12.  TITLE  NAME  STREET ADDRESS CHY-SI-ZIP TITLE  NAME  STREET ADDRESS CHY-ST-ZIP CHY-ST-ZIP TITLE  NAME                                                                                                                                                                                              |                          |                       | O DIRECTORS  DELETE  DELETE    | 13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 DTY-ST-ZP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 GTY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4 CTY-ST-ZIP  4.1 TITLE  4.2 NAME  4.3 STREET ADDRESS                                                                                                                                                                                                                                                             | ADDITIONS/CHANGES TO OFFICERS AND P PAPPOU CHRIST 3209 NE 40 ST FT. LAUDERSAIR FL 33 V.P. ROUSBULIS, CHRIS 3209 N.E 40 ST FT LAUDERSAIR FL SIT PAPPOU, ANDREA 3209 NE 40 ST                                               | Change   Addition   308   Addition   Addition   Addition   Addition   Addition   Addition   Addition   Addition   Change   Addition   Addition   Addition   Addition   Addition   Addition   Addition   Change   Addition   Addition   Addition   Addition   Addition   Addition   Change   Addition   Ad |
| 12.  TITLE  NAME  STREET ADDRESS CHY-SI-ZIP TITLE  NAME  STREET ADDRESS CHY-ST-ZIP CHY-ST-ZIP TITLE  NAME                                                                                                                                                                                              |                          |                       | O DIRECTORS  DELETE  DELETE    | 13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CMY-ST-ZMP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CMY-ST-ZMP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4 CMY-ST-ZMP  4.1 TITLE  4.2 NAME  4.3 STREET ADDRESS  4.4 CMY-ST-ZMP  4.1 STREET ADDRESS  4.4 CMY-ST-ZMP                                                                                                                                                                                                        | ADDITIONS/CHANGES TO OFFICERS AND P PAPPOU CHRIST 3209 NE 40 ST FT. LAUDERSAIR FL 33 V.P. ROUSBULIS, CHRIS 3209 N.E 40 ST FT LAUDERSAIR FL SIT PAPPOU, ANDREA 3209 NE 40 ST                                               | 308   Change   Addition   Additio |
| 12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  TITLE  NAME  TITLE                                                                                                                                   |                          |                       | O DIRECTORS  DELETE  DELETE    | 13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 DTY-ST-ZP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 GTY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4 CTY-ST-ZIP  4.1 TITLE  4.2 NAME  4.3 STREET ADDRESS  4.4 CTY-ST-ZIP  5.1 TITLE                                                                                                                                                                                                                                  | ADDITIONS/CHANGES TO OFFICERS AND P PAPPOU CHRIST 3209 NE 40 ST FT. LAUDERSAIR FL 33 V.P. ROUSBULIS, CHRIS 3209 N.E 40 ST FT LAUDERSAIR FL SIT PAPPOU, ANDREA 3209 NE 40 ST                                               | Change   Addition   308   Addition   Addition   Addition   Addition   Addition   Addition   Addition   Change   Addition   Addition   Change   Addition   Addition   Addition   Change   Addition   Addition   Addition   Addition   Change   Addition   Addition   Addition   Addition   Change   Addition   Additi |
| 12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME  STREET ADDRESS                                                                                                                                |                          |                       | O DIRECTORS  DELETE  DELETE    | 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                                                                                                                                                                                                                   | ADDITIONS/CHANGES TO OFFICERS AND P PAPPOU CHRIST 3209 NE 40 ST FT. LAUDERSAIR FL 33 V.P. ROUSBULIS, CHRIS 3209 N.E 40 ST FT LAUDERSAIR FL SIT PAPPOU, ANDREA 3209 NE 40 ST                                               | Change   Addition   308   Addition   Addition   Addition   Addition   Addition   Addition   Addition   Addition   Change   Addition   Addition   Addition   Addition   Addition   Addition   Addition   Change   Addition   Addition   Addition   Addition   Addition   Addition   Change   Addition   Ad |
| 12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME                                                                                                                                                                                          |                          |                       | O DIRECTORS  DELETE  DELETE    | 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  5.3 STREET ADDRESS  5.3 STREET ADDRESS  5.4 CITY-ST-ZIP  5.5 NAME  5.5 STREET ADDRESS                                                                                                                            | ADDITIONSICHANGES TO OFFICERS AND P PAPPOU CHRIST 3209 NE 40 ST FT. LAUDORDAME FL 33 V.P. ROUSBULIS CHRIS 3209 N.E 46 ST FT LAUDORDAME FL SIT PAPPOU, ANDREA 3209 NE 40 ST FT LAUDORDAME FL                               | Change   Addition   308   Addition   Addition   Addition   Addition   Addition   Change   Addition   Change   Addition    |
| 12.  TITLE  NAME  STREET ADDRESS  CITY-S1-ZIP                                                                                                                                                             |                          |                       | DELETE  DELETE  DELETE  DELETE | 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  5.3 STREET ADDRESS  4.4 CITY-ST-ZIP  5.1 TITLE  5.2 NAME  5.3 STREET ADDRESS  5.4 CITY-ST-ZIP                                                                                                                    | ADDITIONSICHANGES TO OFFICERS AND P PAPPOU CHRIST 3209 NE 40 ST FT. LAUDORDAME FL 33 V.P. ROUSBULIS CHRIS 3209 N.E 46 ST FT LAUDORDAME FL SIT PAPPOU, ANDREA 3209 NE 40 ST FT LAUDORDAME FL                               | Change   Addition   308   Addition   Addition   Addition   Addition   Addition   Addition   Change   Addition   Addition  |
| 12.  TITLE  NAME  STREET ADDRESS  CITY-S1-ZIP  TITLE  NAME  NAME  NAME                                                                                                                                    |                          |                       | DELETE  DELETE  DELETE  DELETE | 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  5.3 STREET ADDRESS  5.4 CITY-ST-ZIP  6.1 TITLE                                                                                                                                                                   | ADDITIONS/CHANGES TO OFFICERS AND P PAPPOU CHRIST 3209 NE 40 ST FT. LAUDERSAME FL 33 V.P. ROUSBULIS, CHRIS 3209 N.E 40 ST FT LAUDERSAME FL SIT PAPPOU, ANDREA 3209 NE 40 ST FT LAUDERSAME FL  5000025146 -05/07/9801009-0 | Change   Addition   308   Addition   Addition   Addition   Addition   Addition   Change   Addition   Change   Addition    |
| 12.  TITLE  NAME  STREET ADDRESS  CITY-\$1-ZIP  TITLE  NAME  STREET ADDRESS  CITY-57-ZIP  TITLE  NAME  STREET ADDRESS  CITY-57-ZIP  TITLE  NAME  STREET ADDRESS  CITY-57-ZIP  TITLE  NAME  STREET ADDRESS  CITY-51-ZIP  TITLE  NAME  STREET ADDRESS | V                        | OFFICERS ANI          | DELETE  DELETE  DELETE  DELETE | 13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CTY-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  5.3 STREET ADDRESS  4.4 CITY-ST-ZIP  6.1 TITLE  6.2 NAME  6.3 STREET ADDRESS  5.4 CITY-ST-ZIP  6.1 TITLE  6.2 NAME  6.3 STREET ADDRESS  5.4 CITY-ST-ZIP  6.1 TITLE  6.2 NAME  6.3 STREET ADDRESS  5.4 CITY-ST-ZIP | ADDITIONSICHANGES TO OFFICERS AND P PAPPOU CHRIST 3209 NE 40 ST FT. LAUDORDAME FL 33 V.P. ROUSBULIS CHRIS 3209 N.E 46 ST FT LAUDORDAME FL SIT PAPPOU, ANDREA 3209 NE 40 ST FT LAUDORDAME FL                               | Change   Addition   308   Addition   Addition   Addition   Addition   Addition   Change   Addition   Addition  |