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

Mailing Address

1515 UNIVERSITY DRIVE

PROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business

1515 UNIVERSITY DRIVE



FLORIDA DEPARTMENT OF STATE

**FILED** 

Mar 11 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P93000085144 (2)

PROMAN INTERNATIONAL, INC.

information indicated on this annut am an officer or director of the cappears in Black 12 or Block 12

SIGNATURE:

SULL AN R. ELE    Sultra   Sul	SUITE 109 CORAL SPRIN US	GS FL 33071	SUITE 109 CORAL SPRINGS FL 33071- US	<b>60</b> 65			Date Incorporated or Qualified     12/14/1993		ate of La 14/199		ort
Solic Apt #, etc.    Solic Apt #, etc.   Solic		Pace of Business	<del></del>				Į.			<del></del>	
Cally & State   State   Cally & Call	21						59-2499610			<del></del>	
22] 7p Country Zp Country A Country Zp Country B State of Current Registered Agent 1	Su te, Apt. <b>22</b>	#, etc				5. Certificate of Status Desired					
25   29   30   10   Name and Address of Current Registered Agent   10   Name and Address of New Registered Agent   2011 E ATLANTIC BLVD	City & Stat	le	——————————————————————————————————————								
SULLIMAN, WILLIAM F   2401 E ATLANTIC BLVD   SUITE 410   POMPANO BEACH FL 33062   For inches of control of the production of Societies 607 05.02 and 607 15.08. Florido Statutes, the above-handed corporation submits this statement for the purpose of changing its registered agent 1 and capture to the great of florido, Such change was authorized by the corporation's board of directors. Hereby accept the appointment as registered agent 1 and capture to the great of florido, Such change was authorized by the corporation's board of directors. Hereby accept the appointment as registered agent 1 and capture the florido accept the other productions of Section 07 0505, Florido Statutes. The above-handed corporation's board of directors. Hereby accept the appointment as registered agent 1 and capture the purpose of changing its registered agent 1 and capture the purpose of changing its registered agent 1 and capture the purpose of change its registered agent 1 and capture the purpose of change its registered agent 1 and capture the purpose of change its registered agent 1 and capture the purpose of change its registered agent 1 and capture required when certaining)  12. OFFICE IS AND DIRECTORS 1 12. In THIE    D	<del></del>	Country	Ζιρ	Country	y		8. This corporation has liability for i			ler s. 1	99.032,
SULLIVAN, WILLIAM F 2401 E ATLANTIC BLVD SUTE 410 POMPANO BEACH FL 33082  84 City FL  85 Zip Code  11. Pursuand to this previsions of Sociations 607 0502 and 607 1508, floridal Statutes, the above-named corporation submits this statement for the purpose of changing its registered algorit or both, in the State of Florida. Such change was authorized by the ordinators. I hereby accept the appointment as registered algorit or both, in the State of Florida. Such change was authorized by the ordinators. I hereby accept the appointment as registered algorit and authorized by the ordinators. I hereby accept the appointment as registered algorit and authorized by the ordinators. I hereby accept the appointment as registered algority and accept the obligations of, Sociation 207,0505, Floridal Statutes.  12. OF FIGHTS AND DIRECTORS 11 3. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. OF FIGHTS AND DIRECTORS 11 11/11LE  12. OF FIGHTS AND DIRECTORS IN 12  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. OR FIGHTS AND DIRECTORS IN 12  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  16. D  16. CassiDY, JOSEPH  16. D  16. CassiDY, JOSEPH  16. D  16. CassiDY, JOSEPH  17. In It E  18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  18. ADDITIONS/CHANGES TO	24			30		· · · · · · · · · · · · · · · · · · ·					,
SULT   ATTAINTIC BLVD   SUTE   410   POMPANO BEACH FL 33062   SUTE			nt Registered Agent		_		10. Name and Address of New Re	gistered	Agent		
SUITE 410   POMPANO BEACH FL 33062   84    City	SUL	LLIVAN, WILLIAM F		81		Name	•				
POMPANO BEACH FL 33062	240	1 E ATLANTIC BLVD		82 Street Add			ess (P.O. Box Number is Not Acceptab	le)	····		
### City ### City ### City #### City #### City ####################################					L						
Passacrit to the provisions of Sections 607 0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. In familiar with, and accept the obligations of, 500-505, Florida Statutes.    Passacrit ten familiar with, and accept the obligations of, 500-505, Florida Statutes.   Passacrit ten familiar with, and accept the obligations of, 500-505, Florida Statutes.   Passacrit ten familiar with, and accept the obligations of, 500-505, Florida Statutes.   Passacrit ten familiar with, and accept the obligations of, 500-505, Florida Statutes.   Passacrit ten familiar with, and accept the obligations of, 500-505, Florida Statutes.   Passacrit ten familiar with, and accept the obligations of, 500-505, Florida Statutes.   Passacrit ten familiar with, and accept the obligations of, 500-505, Florida Statutes.   Passacrit ten familiar with, and accept the obligations of, 500-505, Florida Statutes.   Passacrit ten familiar with, and accept the obligations of, 500-505, Florida Statutes.   Passacrit ten familiar with, and accept the obligations of, 500-505, Florida Statutes.   Passacrit ten familiar with, and accept the obligations of, 500-505, Florida Statutes.   Passacrit ten familiar with, and accept the obligations of, 500-505, Florida Statutes.   Passacrit ten familiar with, and accept the obligations of, 500-505, Florida Statutes.   Passacrit ten familiar with, and accept the obligations of, 500-505, Florida Statutes.   Passacrit ten familiar with, and accept the obligations of, 500-505, Florida Statutes.   Passacrit ten familiar with, and accept the obligations of descrit ten familiar with, and accept the obligations of, 500-505, Florida Statutes.   Passacrit ten familiar with, and accept the obligations of descrit ten familiar with, and accept the obligations of descrit ten familiar with, and accept the obligations of descrit ten familiar with, and accept the obligations of descrit ten familiar with, and accept the obligations of descrit ten fam	POI	MPANO BEACH FL 33062		83	1						
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agent Lord famile and family and accept the obligations of Section 607-0505, Florida Statutes.  SIGNATURE  SIGNATURE  12. OFFICERS AND DIRECTORS  TITLE  OFFICERS AND DIRECTORS  TITLE  CASSIDY, JOSEPH  DOREIFALTIGKETSSTRASSE 19A  D-440025 DUSSELDF, GERMANY  DAVID DELETE  TITLE  D Change Addition  KASTNER, HERMAN  DOREIFALTIGKETSSTRASSE 19A  D-440025 DUSSELDF, GERMANY  DAVID DELETE  TITLE  D Change Addition  KASTNER, HERMAN  DOREIFALTIGKETSSTRASSE 19A  D-440025 DUSSELDF, GERMANY  DOREIFALTIGKETSSTRASSE 19A  D-440025 DUSSELDF, GERM				"	Ί	Oity		FL	.   "	Lip 00	,50
THE	SIGNATURE	Signature Typed or powed name of registered ag	pent and other flappic able (NOTE:	Flogistered Ag			VIEWER - 11 - 11 - 11 - 11 - 11 - 11 - 11 -				
NAVE   CASSIDY, JOSEPH   12 MAME   1.3 STREET ADDRESS   DA   1.4 CITY-ST-ZIP		Y					ADDITIONS/CHANGES TO OFFIC	ERS AND			***************************************
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D-440625 DUSSELDF,GERMANY	NAME		404	1.2 NAME							
DELETE   D	STREET ADDRESS			1.3 STREE	ΤA	ADDRESS		•			
MOUGET, ERICH   DREIFALTIGKEITSSTRASSE 19A   23 STREET ADDRESS   D-440625 DUSSELDF, GERMANY   DELETE   31 TITLE   Change   Addition   Additio	***************************************	I		~~~					TT AL		F 1 4 3 100
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D-440625 DUSSELDF,GERMANY   2 4 DITY-ST-ZIP			40.8		1						
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STREET ADDRESS		_ <del>-</del>	F"I perite	4		l			[_1 O/Id	AINC I	L. Houlder
D-440625 DUSSELDF,GERMANY   34. CITY-ST-ZIP     Change   Addition   Additio			194			AUUDEGG					
DELETE		1 - ·									
NAME					01	1-111			Cha	ınge	Addition
A STREET ADDRESS   CORAL SPRINGS FL 33065		POWERS, ROBERT W									
CORAL SPRINGS FL 33065	·		•	4.3 STREE		ADDRESS					
DELETE   DELETE   5.1 TITLE		CORAL SPRINGS FL 33065		4.4 CITY-ST-Z		r-21P					
		DELETE							Cha	inge	Addition
	NAME			5.2 NAME							
TITLE	STREET ADDRESS			5.3 STREE	TA	address					
NAME         6.2 NAME           STREET ADDRESS         6.3 STREET ADDRESS           CHY-S1-ZP         6.4 CHY-S1-ZIP	CITY+ST ZIP				\$T	(- <b>Z</b> IP					
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	STREET ADDRESS			6.3 STREE	T A	ADDRESS	•				

finual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name