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

PROFIT CORPORATION ANNUAL REPORT 1997

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

**FILED** 

Mar 12 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # P9400003344 (6)

U.S. ASSEMBLIES CORAL SPRINGS, INC.

Q.D. 7101	OPHIOLICA COM.	e o, imioo, ii									
Principal Place	e of Business		Mailing Address						614H 26H 66	<b>ee</b> ander ham baba	#1#1 1##1
12175 N.W. 39TH STREET CORAL SPRINGS FL 33065 US			320 N. JENSEN RD. VESTAL NY 13850-2132 US				:				
Fi.			1				1	3. Date Incorporated or Qualifi 01/13/1994	. 1	Date of Last R 5/01/1996	eport
2. Principal Place of Business			2a. Mailing Address					4. FEI Number 65-0465065			plied For of Applicable
Suite, Apt. #, etc.			Suite, Apt. #, etc.					5. Certificate of Status Desired		\$8.75	Additional
22 Oity & State			City & State					6. Election Campaign Financin	<u> </u>	Fee Re \$5.00	
Zip Country			Zip Country					Trust Fund Contribution		Added t	lo Fees
Zip 24	25	· )	Zip Cour 29 30					8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes No			
	9. Name and Addr							10. Name and Address of New Registered Agent			
XL C	ORPORATE SERVIC	ES, INC.			81	4	Name :				
% 354 OFFICE PLAZA MAGNOLIA OFFICE CENTER TALLAHASSEE FL 32301				82	9	Street Addrés	ss (P.O. Box Number is Not Acceptable)				
					83	1			······································		
					84	1	City		F	85 Zip (	Code
11. Pursuant i	to the provisions of Sec egistered agent, or bot	ctions 607.0502 and h, in the State of Fl	d 607,1508, Flo orida, Such cha	rida Statute inge was a	s, the abov	e-na	amed corpo e corporatio	ration submits this statement for t in's board of directors. I hereby a	he purpose ccept the ap	of changing it opointment as	s registered registered
agent. I a SIGNATURE	m <b>fa</b> miliar with, and ac	cept the obligation:	s of, Section 60	7.0505, Fio	rida Statute	\$5.					
	Signature, typed or printed name			(NOTE		jent s	ignature required	when reinslating)	DATE	ID DIOCOTOR	0.11.40
12.	D	OFFICERS AND DIF		DELETE	13.		<del></del>	ADDITIONS/CHANGES TO O	FFICERS AT	Change	Addition
TITLE	MATTHEWS, JAME	e c	٠.	DETEIE	3		}			L Citalife	L'I Vandion
NAME STREET ADDRESS	320 NORTH JENS				1.2 NAME 1.3 STREE	n and	nerce				ļ
CMY-ST-ZIP	VESTAL NY 13850				1.4 GITY-		ł				ľ
TITLE	ST			DELETE	2.1 TITLE	31.5	<del>" -  </del>	<del></del>		Change	Addition
NAME ]	DAVIS, LAWRENCE	E <b>E</b> .			22 NAME		ł				• }
STREET ADDRESS	320 N. JENSEN R				2.3 STREE	T ADE	DRESS				
CITY-ST-ZIP	VESTAL NY				2. 4 CITY -	-ST - Z	ZIP				
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STREET ADDRESS	•				5.3 STREE	T ADO	DRESS				
CITY-ST-ZIP					5.4 CITY-	S1-Z	yP }				{
ATTLE 146	4.00			DELETE	6.1 TITLE					Change	Addition
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STREET ADDRESS	in a				6.3 STREE	T ADO	DRESS				Ì
CITY-ST-ZIP)	<u> </u>				6.4 C/TY~						
informatio	en indicated on this ann	iual report or suppl	emental annual	герог <b>и</b> я <b>п</b>	ue and acc	urat	te and that n	in Section 119.07(3)(i), Florida Sta ny signature shall have the same as required by Chapter 607, Flori	iegai effect	as it made und	ger oath; that j
appears	n Block 12 or Block 13	Keha ged, or on a	an attachment v	vijb an adg	ress.	2010	report	:		2 i mic 1719 71	

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