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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Morthani Sceretary of State DIVISION OF CORPORATIONS

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P94000004283 (5)

11 Corporation	MENT # P940 (-A-YOT, INC.	00004283 (5)	Î (BEHADÎ HE KUN BANK BANK BENK BENK	i d an bi dhi b hair mhoir ainn an is ann a
Principal Place	of Business	Mailing Address			01 1%
676 W PROSPECT RD FT LAUDERDALE FL 33309		676 W PROSPECT RD FT LAUDERDALE FL 33309			
				3. Date Incorporated or Qualified 3a 01/19/1994	. Date of Last Report 06/02/1995
2. Principal Pla 21		2a. Mailing Address 26		4. FE1 Number 65-0488373	Applied For Not Applicable
Suite Apt. #	, etc	Suite, Apt #, etc		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		Crty & State		6. Flection Campaign Financing	\$5.00 May Be
Ζιρ 24	Country 25	Zip 29]	Country	8. This corporation has liability for intang	Added to Fees pible tax uncler s 199.032,
	9. Name and Address of Curre		[30]	Florida Statutes Yes 10. Name and Address of New Regist	-
676 W P	er, Chris Rospect Rd Erdale Fl 33309		82 Street Add 83 84 City	iress (P.O. Box Number is Not Acceptable)	FL 85 Zip Code
familiar with SIGNATURE S 12.	and accept the obligations of, Section of the secti	ton 607.0505, Florida Statute	CHE How tens (A) or signation tempor 13.	ration submits this statement for the purpose and of directors. I hereby appent the appointment of directors and the appointment of the appointmen	ent as registered agent. I ani.
TITLE	P CONTROL OF THE	☐ DELETE	1. 1 TIFLE		☐ Change ☐ Addition
NAME STREET ADDRESS	SCRIMGER, CHRIS 676 W PROSPECT RD	•	1.2 NAME		
CITY-ST-ZIP	FT LAUDERDALE FL 33309		1.3 STREET ADDRESS		
TITLE		☐ DELLIE	2 1 TITLE		Change Addition
NAME		bes. of	2.2 NAME		Change Addition
STREET ADDRESS			2.3 STREET ADDRESS		
City-ST-ZiP			2.4 City - S1 - 7iP		
TITLE		DELFTE	3 1 11116		Change Addition
NAME STREET ADDRESS			3.2 NAME		
DITY-ST ZIP			3.3 STHEET ADDRESS		
IITLE .		DELETE	3.4 G(EY - S1 - Z) ^Q 4.1 T(E)		
NAME		<u> </u>	4.2 NAME		Change Addition
STREET ADDRESS			4.3 STREET ADORESS		
CHTY-ST-ZIP			44 Cilly - ST ZiP		
TILE		☐ DELETE	5 1 TIFLE		Change Addition
IAME			5.2 NAME		_
STREET ADDRESS			5.3 STREET ADDRESS		
HTLE			5.4 CITY - \$1 - ZIP		
IAME		☐ D€LĒTE	6 1 TITLE		Change Addition
STREET ADDRESS			£ 2 NAME		
CITY - ST - ZIP	· ·		6.3 STREET ADDRESS		
14. I do hereby of certify that the oath; that I a	pertify that the information supplied ne information indicated on this ann im an officer or director of the corp look 12 or Block 13 if changed, or	include on the receiver or tracts	idali report is true and accora	or the exemption stated in Section 119 07(3)(6) the and that my signature shall have the same is sneport as required by Chaptel 607, Florida S), Florida Statutes. I further legal effect as if made under tafutes, and that my name

SIGNATURE:

9545879490