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CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B Mortham Secretary of State DIVISION OF CORPORATIONS

1996

SIGNATURE:

P94000009442 (2)

DOCUMENT #
1. Corporation Name

Principal Place of Business Mailing Address 5500 N.W. 21ST TERR. HANGAR B FT. I AllD. Ft. 33309 Mailing Address 601 LYONS ROAD NO. 7204 COCONUT CREEK FL 33063						
FT. LAUD. FL 33309 US		COCONUT CREEK PL 35063		3, Date Incorporated or Qualified 3a, Date of Last Report 02/04/1994 05/01/1995		
2. Principal Place	ce of Business	2a, Mailing Address		4. FEI Number 65-0489778		plied For
Suite, Apt. #	, etc.	Suite, Apt. #, etc.	Share, Assoc (2015), 20 (1990)	5. Certificate of Status Desired	\$8.75 A	Additional
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 Added to	
Ζφ 24	Country 25	Zrp 29	Country 30	1	s 🗌 No	99.032,
601 LY NO. 72	9. Name and Address of Currer O, ANTHONY ONS ROAD 04 NUT CREEK FL 33063	t nogsteled Agent	81 Name 82 Street Addi 83 84 City	10. Name and Address of New I	ule)	Code
or registere familiar with SIGNATURE	Myllesy	da, Such Mange was authoris on 607,0505, Forma Statute arc toted applicable (N	zed by the corporation's boa S OTE: Bigisteric Agent signal ire require	ration submits this statement for the purd of directors. I hereby accept the application of the purd of directors and the purd of the purd	pointment as registered as	gent. I am
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D SCALZO, ANTHONY 601 LYONS ROAD, NO. 72 COCONUT CREEK FL 3300	☐ DELETE 04	13. 1. 1 Title 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-S1-ZiP	ADJITIONS/OFWINGES TO OT		S IN 12
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ DELETE	2 1 TITLE - 22 NAME - 23 STREET ADDRESS - 24 GHY-ST-ZIP		☐] Change	Addition
TITLE NAME STREET ADDRESS		☐ DELETE	3 111/LE 32 NAME 33 STREET ADDRESS 34 CITY- 51-ZIP		Change	Addition
C-1Y-SI-Z-P TITLE MAME STREET ADDRESS		DELETE	4.1 TOLE 4.2 NAME 4.3 STREET ADDRESS		Change	Add tion
TITLE NAME STREET ADDRESS		☐ DELETE	4 4 CITY-ST-ZIP 5 1 THEF 52 NAM: 53 STREET ADDRESS		Change	Addition
TITLE NAME STREET ADDRESS		☐ DELETE	5.4 C/TY-S1-7/P 6.1 TITLE 62 NAME 6.3 STREET ADDRESS 6.4 C/TY S1-7/P		Change	Addition
CITY-ST-ZIP 14. I do hereby certify that oath; that I appears in	y certify that the information supplied the information indicated on this ann I am an officer or director of the corp Block 12 or Block 12 if changed, or	with this filing is voluntarily fur ual report or supplemental an oration or the receiver or trust on an attachment with an add	64 CITY-S1-7IP pished and does not qualify now report is true and accurate empowered to execute thems.	for the exemption stated in Section 119 ate and that my signature shall have th is report as required by Chapter 607, f	3.07(3)(k), Florida Statutes o same legal effect as if n lorida Statutes; and that	s. I further nade under my name