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

PROFIT CORPORATION ANNUAL REPORT



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

1996 **DOCUMENT #**

1. Corporation Name

P94000009497 (6)

201 LEST HOLLYWOOD FL 3020 202 LEST HOLLYWOOD FL 3020	MORI	JCON, INC.						
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27	City & State	!	City & State			6. Election Campaign Financing	\$	5.00 May Be
28			+			Trust Fund Contribution	11	· /
10, Name and Address of New Registered Agent				n	try		_	der s. 199.032,
1. Pursuant to the provisions of Sections 837 (000) and 607 (1506, Fordas Statute, the above or registered agent of text, in the State of Fordar Such organization submits this statement for the purpose of changing its registered observer agent, or text, in the State of Fordar Such organization submits this statement for the purpose of changing its registered observer registered agent. Tambien with and descript the obligations of Section 607 (000), Fordar Statutes, the above organization submits this statement for the purpose of changing its registered observer registered agent. Tambien with and descript the obligations of Section 607 (000), Fordar Statutes. 1. Pursuant to the provisions of Sections 607 (000), Fordar Statutes, the above organization submits this statement for the purpose of changing its registered observer registered agent. Tambien with and descript the obligations of Section 607 (000), Fordar Statutes, the organization submits this statement for the purpose of changing its registered observer registered obser	24			30		J		
1201 HAVS ST. TALLAHASSEE FL 32301 88 Only FL 85 Zo Code				1	B1 Name	10. There are reduced of New F	-Pistoreo Myen	
1201 HAVS ST. TALLAHASSEE FL 32301 88 Only FL 85 Zo Code	CORPO	DRATION INFORMATION SERVICE	ES INC.	ļ.	31 5	(D.O. C) - Ni sole - Sa Nice A	1-3	
Section Sect				ľ	Street Add	ress (F.O. BOX Number is NOt Acceptat.	iej	
11. Pursuant to the provisions of Sections 607 0002 and 607 1508, Florida Statutes, the above named corporation submits this statement for the purpose of cliging its registered discorregistered agent, or both, in the State of Erickia. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of Soction 607 0005. Florida Stututes are provided agent. I am familiar with, and accept the obligations of Soction 607 0005. Florida Stututes are provided agent. I am familiar with an appointment as registered agent. I am familiar with a support of the purpose of cliging its registered of fice or registered agent. I am familiar with a support of the purpose of cliging its registered of fice or registered agent. I am familiar with a support of the purpose of cliging its registered of fice or registered agent. I am familiar with a support of the purpose of cliging its registered of fice or registered agent. I am familiar with a support of the purpose of cliging its registered of fice or registered agent. I am familiar with a support of the purpose of cliging its registered of fice or registered agent. I am familiar with a support of the purpose of cliging its registered of fice or registered agent. I am familiar with a support of the purpose of cliging its registered of the corporation's beart of directors. Thereby accept the appointment as registered agent. I am familiar with a support of the corporation's beart of directors. Thereby accept the appointment as registered agent. I am familiar with a support of the purpose of the corporation's suppose of the purpose of the corporation's suppose of the purpose of the purpose of the purpose of the corporation's suppose of the				1	33			
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10	or registere	ed agent, or both, in the State of Florid	ta. Such change was authoriz	red by the co	e named corpo prporation's boa	ration submits this statement for the pur rd of directors. I hereby accept the app	pose of changing pintment as regis	j its registered office tered agent. I am
10	SIGNATURE _							
10	44	Signature, typed or producting a of reacters to sec	arche Lagrandie (NO		kut silentar aslac			
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14. I do hereby certify that the information supplied with this filing is vountarily furnished and does not qualify for the exemption stated in Section 119.07(3/k), Florida Statutes. I further			* ### ·	6.4 CiT	- \$1 - 7iP			

certify that the information indicated on this au oath; that I am an officer or director the corappears in Block 12 at Block 13 changed, c what missing is worthamy familised and oces not quality for the exemption stated in Section 1.19.07 (apr), Florida Statutes. Further mist report of supplientental annual report is true and accurate and that my signature shall have the same legal effect as if made under order or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name that my name that my name the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name that my n

SIGNATURE:

PRES. SIGNATURE AND TYPED OF PRINTED TAME OF SIGNING OFFICER OR DIRECTOR