ITTLE VAME SWANKO, MARTIELE P SWANKO, MARTIELE P TTVST.2IP MIAMI FL 33143 IL OPLETE ITTLE IDELETE ITTLE IDELETE IDELETE ITTLE IDELETE IDELE IDELETE ID	CORPORATIO ANNUAL REPO <b>1999</b>	RT		Katheri Secretar DiVISION OF C	RTMENT OF STATE ine Harris ry of State CORPORATIONS	Apr 02, 1 Secretar	LED 999 8:00 ry of Sta 0082 021 ***150.0	
Mailing Address       Mailing Address         Orgo Sev Setting Address       Control Mail Address         MILE 2015       Subject Setting Address         E. Principiel Place of Business       2a. Mailing Address         E. Principiel Place of Business       2a. Mailing Address         Gala Address       4. FEI Names         Gala Address       5. Date Incorporated for Cualified         Out Address       2a. Mailing Address         Gala Address       4. FEI Names         Gala Address       5. Ontot Cualified         Out Address       70         Out Address       5. Ontot Cualified         Out Address       70         Out Address       6. Centicate of Statu Desired         Status       70         Address       70         Status       70         Country       8. This corporation creats the current year Intarphile         SWANKO, MARTIELE P       700         You SW BTH ST.       700         SUBL Address of Country       8. Name         SWANKO, MARTIELE P       700 SW BTH ST.         SUBTIE 100       MAMIL FL 33156         11.       Parcelawer address of Country of Status         12.       OFFCRES ADD ORGE Tottis Status	. corporation realitie		009	915				
Hitter 400 MMLR. 2015       Multic Total MMLR. 2015       Multic Total MMLR. 2015       Down This Space         Principal Place of Business       2a. Maling Address       4. FEI Number       Applied Fer         (4326) Subarst Devine       2a. Maling Address       4. FEI Number       Applied Fer         (330) Subarst Devine       2a. Maling Address       4. FEI Number       Applied Fer         (330) Subarst Devine       2bite Apt # etc.       5000 Apt # etc.       550.75 Additional         (331) Subarst Devine       701       55.00 Mps bite       755.00 Mps bite         (2b) Gastes       701       0. Name and Address of Current Registered Agent       755.00 Mps bite         (2b) Gastes       701       701       55.00 Mps bite       755.00 Mps bite         (2b) Gastes       701	rincipal Place of Business		Mai	ling Address			<b>4</b> #11# 1.01#1 0.0#10 1 <b>0</b> 1#0 10101	
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Principal Place of Business      Principal Place      Principa		4 FL 33142				DO NOT WRITI	E IN THIS SPACE	
Principal Place of Business         Za, Mailing Address         4. FEI Number         Applied For           LG320 55.05c1 D2.NC         Salls, Apt, I, etc.         5.         65:0482932         \$6:70482932         \$8.75 Additional For Regurance           City & State         27         City & State         6: Election Campelon Financing         \$5:00 May Bit Additional         \$5:0			,			3. Date Incorporated or Qualifed		
Light Subscription         Suite, Apt. #, etc.         65-0482932         International Status Desired         Status Apt. #, etc.           City & State         2         Suite, Apt. #, etc.         5         Control         Status Apt. #, etc.         5         Status Apt. #, etc. #, etc. #, etc. #, etc. #, etc. #, etc. #, etc	-							
GUAN JD NCL / DZINC       DUIDA Apt. #, etc.       COUNDED Country       \$8.75 Acditional         City & State       Control Country       State       State Apt. #, etc.       State Apt. #, etc.         City & State       City & State       City & State       State Apt. #, etc.       State App. #, etc.         City & State       City & State       City & State       State App. #, etc.       State App. #, etc.       State App. #, etc.         City & State       Country       Zip       Country       Zip       State App. #, etc.       State App. #, etc.<		•		Mailing Address				-
27       S. Cartitate Status Desired       For Required         City & State       City & State       * Election Campaigh Financing       S5.00 May be         20       Country       Zip       Country       8. This conjoin owes the current year intangible         3 3 1\3       2ip       Country       2ip       Country       8. This conjoint owes the current year intangible         9. Name and Address of Current Registered Agent       10. Name and Address of Current Registered Agent       11. Name and Address of New Registered Agent         9. Name and Address of Current Registered Agent       10. Name and Address of New Registered Agent       11. Name and Address of New Registered Agent         9. Name and Address of Current Registered Agent       11. Name and Address of New Registered Agent       12. The Country New Registered Agent         9. Support and the provisions of Sections 807.0502 and 607.1506, Florida Statutes, the above-hamed corporation submits this statement for the purpose of changing its registered agent, and Raming the obligations of Sections 607.0502 and 607.1506, Florida Statutes.       13. ADDIT/ONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.         SIGNATURE       0 Chip de protein and of spontal and registered agent of the spontal and of s		Deive		Suite, Apt, #, etc.			\$8.75 A	
Aliant       FL       28       Tust Fund Contribution       Added to Fees         Zip       Country       2;p       Country       8. This corporation over the current year intangible         9. Name and Address of Current Registered Agent       10. Name and Address of New Registered Agent       10. Name and Address of New Registered Agent         9. Name and Address of Current Registered Agent       10. Name and Address of New Registered Agent       10. Name and Address of New Registered Agent         9. Name and Address of Current Registered Agent       10. Name and Address of New Registered Agent       10. Name and Address of New Registered Agent         9. Name and Address of Society Bits of Current Registered Agent       81       Name       10. Name and Address of New Registered Agent         9. Name and Address of Current Registered Agent       81       Name       10. Name and Address of New Registered Agent         9. Name and Address of Current Registered Agent       81       Name       10. Name and Address of New Registered Agent         9. Name and Address of Current Registered Agent Units of New Society Socie	- · ·					5. Certifcate of Status Desired	Li Fee Re	quired
Zp       Country       Zp       Country       2       2       Country       8. This corporation owes the current year intangible Presenal Property Tax.       Image and Address of Current Registered Agent         SWANKO, MARTIELE P       10. Name and Address of Now Registered Agent       81       Name	City & State	••••••••••••••••••••••••••••••••••••••		City & State -				
3         3         Personal Property Tax.         1	····· المناحل المالكة الإساسيين ا	Country		7:0	Country			o Fees
B. Name and Address of Current Registered Agent       10. Name and Address of New Registered Agent         SWANKO, MARTIELE P 7100 SW 88TH ST. SUITE 100 MIAMI FL 33156       81       Name         1. Pursuant to the provisions of Sections 607.0502 and 507.1508. Florids Statutes. MIAMI FL 33156       84       City       FL       65       Zip Code         1. Pursuant to the provisions of Sections 607.0502 and 507.1508. Florids Statutes. MIAMI FL 33156       84       City       FL       65       Zip Code         1. Pursuant to the provisions of Sections 607.0502 and 507.1508. Florids Statutes.       84       City       FL       65       Zip Code         1. Pursuant to the provisions of Sections 607.0502 and 507.1508. Florids Statutes.       84       City       FL       61       Zip Code         1. Statutes.       Cohange was authoraced by the corporation's board of directors. I hereby accept the appointment as registered agent.1 am final multity, and accept the obligations of Sections 607.0506. Florids Statutes.       Note       Change       Additi         1.GNATURE       DEFICERS AND DIRECTORS       13.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.       Change       Additi         1.ST-2P       DELETE       1.STRETADORESS       1.STRETADORESS       Change       Additi         Nrs1-2P       DELETE       3.STRETADORESS       Change       Additi         Nrs1		7 _ <sup>*</sup>		1.	· · · ·			□No
SWANKO, MARTIELE P         7100 SW 88TH ST.         SUTE 100         MIAMI FL 33156         1. Pursuant 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, or both, in the State of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Statutes, the above-named corporation submits this statement as registered agent, or both, in the colligations of, Socion 607.0505, Florida Statutes, the above-named corporation submits this statement as registered agent, or both, in the State of Florida Statutes, the above-named corporation submits this statement as registered agent, or both, in the colligations of, Socion 607.0505, Florida Statutes, the above-named corporation submits this statement as registered agent, or both, in the State of Florida Statutes, the above-named corporation submits this statement as registered agent, or both, in the State of Florida Statutes, the above-named corporation submits this statement as registered agent, or both, in the State of Florida Statutes, the above-named corporation submits this statement as registered agent, or both, in the State of Florida						10. Name and Address of New Re	egistered Agent	
7100 SW 88TH ST. SUITE 100 MIAMI FL 33156       12       Steel Address (P.O. Box Number is Not Acceptable)         12       Steel Address (P.O. Box Number is Not Acceptable)       83         14       City       FL       85       Zip Code         15       City       FL       85       Zip Code         16       Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutes, the above-named corporation's board of direction's back of the appointment is registered agent, or boh, In the State of Florida, Statutes.       Note Corporation's board of direction's back of the appointment is registered agent, or boh, In the State of Florida, Statutes.         IGNATURE       Immiliant interview of impaired agent and tell subcentame.       Note Requested Agent, or boh, In the State of induced agent and tell subcentame.       Date         IGNATURE       OFFICERS AND DIRECTORS       13.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.         12       OFFICERS AND DIRECTORS       13.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.         14       OFFICERS AND DIRECTORS       13.       ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.         14       OFFICERS AND DIRECTORS       13.       Change       Addit         15       OBLETE       17.171.2       Change       Addit         16       Statest Address       23.57REF Address       23.57REF Address					81 Name			
SUITE 100 MIAMI FL 33156       as         1. Pursuant 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, an advanced pt the objections of 7,0505, Florida Statutes.       BS       Zip Code         1. Pursuant 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, an advanced the objections of 7,0505, Florida Statutes.       Is advanced to the purpose of changing its registered as statutes.         IGNATURE       Image:					82 Street Add	dress (P.O. Box Number is Not Acceptab	ole)	
MIAMI FL 33156     B4     City     FL     85     Zip Code       I. Pursuent to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the pupped or point and the state of Pointa. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Pointa. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the state of the dipattered agent and the state of Pointa. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, by addition of the corporation's board of directors. I hereby accept the appointment as registered agent, by additionated by the appoint of the appointment as registered agent, by additionated by the appoint of the appoint of the corporation's board of directors. I hereby accept the appointment as registered agent, by additionation of the corporation's board of directors. I hereby accept the appointment as registered agent, and the state of the appoint of the appo		<b>{</b> .			1 1			
B4     City     FL     85     ZP Code       1. Pursuant 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 or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent or board of directors. I hereby accept the appointment as registered florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered florida. Such change was under a gene and the registered florida. Such change florida. Such change florida. Such change florida. Such c					02	· · · · · · · · · · · · · · · ·		
	SUITE 100				83			
D       D       DELETE       1.1 TITLE       Change       Addition         NME       SWANKO, MARTIELE P       1.3 TREET ADDRESS       1.3 STREET ADDRESS       1.4 CITY-ST-ZIP         MIAMI FL 33143       1.4 CITY-ST-ZIP       1.3 STREET ADDRESS       1.4 CITY-ST-ZIP         TREET ADDRESS       DELETE       2.1 TITLE       Change       Addition         REET ADDRESS       2.3 STREET ADDRESS       2.3 STREET ADDRESS       Addition         TY-ST-ZIP       DELETE       2.1 TITLE       Change       Addition         REET ADDRESS       2.3 STREET ADDRESS       2.3 STREET ADDRESS       Addition         TY-ST-ZIP       DELETE       2.1 TITLE       Change       Addition         TX-ST-ZIP       2.2 NAME       3.3 STREET ADDRESS       Addition       Addition         REET ADDRESS       3.3 STREET ADDRESS       3.3 STREET ADDRESS       Addition       Addition         TX-ST-ZIP       3.4 CITY-ST-ZIP       Addition       Addition       Addition       Addition         REET ADDRESS       3.3 STREET ADDRESS       3.3 STREET ADDRESS       Addition       Addition       Addition         TX-ST-ZIP       3.4 CITY-ST-ZIP       3.4 CITY-ST-ZIP       Change       Addition       Addition         MAE	SUITE 100 MIAMI FL 33156	t or both, in the State o	of Florida	a. Such change was ai	84 City es, the above-named cor uthorized by the corporat	poration submits this statement for the p ion's board of directors. I hereby accept	FL	registered
TREET ADDRESS       7727 SW 866TH ST., A1-101       13 STREET ADDRESS         MIAMI FL 33143       14 CITY-ST-ZIP         TLE       DELETE       21 TILE         NME       23 STREET ADDRESS         PREET ADDRESS       23 STREET ADDRESS         TY-ST-ZIP       2.4 CITY-ST-ZIP         ILE       0 DELETE         STREET ADDRESS       2.4 CITY-ST-ZIP         ILE       0 DELETE         STREET ADDRESS       3.3 STREET ADDRESS         TY-ST-ZIP       0 DELETE         STREET ADDRESS       3.3 STREET ADDRESS         TY-ST-ZIP       0 DELETE         STREET ADDRESS       3.3 STREET ADDRESS         TY-ST-ZIP       3.4 CITY-ST-ZIP         UNE       0 DELETE         STREET ADDRESS       3.3 STREET ADDRESS         TY-ST-ZIP       3.4 CITY-ST-ZIP         UNE       1.0 DELETE         STREET ADDRESS       4.3 STREET ADDRESS         TY-ST-ZIP       4.4 CITY-ST-ZIP         NME       5.1 TTTLE         STREET ADDRESS       5.3 STREET ADDRESS         TY-ST-ZIP       4.4 CITY-ST-ZIP         TY-ST-ZIP       2.4 AME         STREET ADDRESS       5.3 STREET ADDRESS         TY-ST-ZIP       5.	SUITE 100 MIAMI FL 33156 1. Pursuant to the provision office or registered agent agent. I am familiar with, SIGNATURE	and accept the obligation	of Florida ions of, S t and title if a	a. Such change was an Section 607.0505, Flor applicable. (NOTE:	84 City es, the above-named corr uthorized by the corporat rida Statutes.	red when reinstating)	PL   urpose of changing its the appointment as reg	registered jistered
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IV-ST-ZIP     34. CTY-ST-ZIP       LE     DELETE       ME     DELETE       4.1 TITLE     Change       Addition       ME     4.2 NAME       4.3 STREET ADDRESS       IV-ST-ZIP       44 CTY-ST-ZIP       DELETE       51 TITLE       DELETE       STREET ADDRESS       IV-ST-ZIP       IV-ST-ZIP       DELETE       STREET ADDRESS       IV-ST-ZIP       StREET ADDRESS       IV-ST-ZIP       IV-ST-ZIP       IV-ST-ZIP       StREET ADDRESS       StREET ADDRESS       IV-ST-ZIP       StREET ADDRESS       StREET ADDRESS       IV-ST-ZIP	SUITE 100 MIAMI FL 33156 1. Pursuant to the provision office or registered agent agent. I am familiar with, IGNATURE Signature, typed or r Signature, typed or r Signature, typed or r Signature, typed or r 2. TLE D SWANKO, N 7727 SW 86 MIAMI FL 33 TLE ME REET ADDRESS IY-ST-ZIP	, or both, in the State c and accept the obligati orinted name of registered agent OFFICERS AND MARTIELE P STH ST., A1-101	of Florida ions of, S t and title if a	A. Such change was an Section 607.0505, Flor applicable. (NOTE CTORS	84     City       es, the above-named corruthorized by the corporating statutes.       Registered Agent signature required to the corporating statutes.       13.       11.1 TITLE       12.NAME       1.3 STREET ADDRESS       1.4 CITY-ST-ZIP       2.1 TITLE       2.3 STREET ADDRESS       2.4 CITY-ST-ZIP       3.1 TITLE	red when reinstating)	FL         uurpose of changing its the appointment as reg         DATE         ICERS AND DIRECTO         Change         Change	RS IN 12
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A4 CITY-ST-ZIP     44 CITY-ST-ZIP       LE     DELETE       S1 TITLE       S2 NAME       S3 STREET ADDRESS       Y-ST-ZIP       LE       DELETE       S4 CITY-ST-ZIP       S4 CITY-ST-ZIP       LE       DELETE       61 TITLE       62 NAME       S2 NAME       S4 CITY-ST-ZIP	SUITE 100 MIAMI FL 33156	, or both, in the State c and accept the obligati orinted name of registered agent OFFICERS AND MARTIELE P STH ST., A1-101	of Florida ions of, S t and title if a	A. Such change was an Section 607.0505, Flor applicable. (NOTE: CTORS	84     City       es, the above-named corruthorized by the corporating Statutes.       Registered Agent signature required       13.       1.1 TITLE       1.2 NAME       1.3 STREET ADDRESS       1.4 CITY-ST-ZIP       2.1 TITLE       2.2 NAME       2.3 STREET ADDRESS       2.4 CITY-ST-ZIP       3.1 TITLE       3.2 NAME       3.3 STREET ADDRESS       3.4 CITY-ST-ZIP	red when reinstating)	FL         uurpose of changing its the appointment as reg         DATE         ICERS AND DIRECTO         Change         Change	RS IN 12 Additio
LE DELETE 51 TITLE Change Addition ME 52 NAME 53 STREET ADDRESS 7-ST-ZIP LE DELETE 61 TITLE Change Addition ME 62 NAME 62 NAME 63 STREET ADDRESS	SUITE 100 MIAMI FL 33156	, or both, in the State c and accept the obligati orinted name of registered agent OFFICERS AND MARTIELE P STH ST., A1-101	of Florida ions of, S t and title if a	A. Such change was an Section 607.0505, Flor applicable. (NOTE: CTORS	84     City       es, the above-named corruthorized by the corporatinda Statutes.       :Registered Agent signature required       13.       1.1 TITLE       1.2 NAME       1.3 STREET ADDRESS       1.4 CITY-ST-ZIP       2.1 TITLE       2.2 NAME       2.3 STREET ADDRESS       2.4 CITY-ST-ZIP       3.1 TITLE       3.2 NAME       3.3 STREET ADDRESS       3.4 CITY-ST-ZIP       4.1 TITLE	red when reinstating)	FL         uurpose of changing its the appointment as reg         DATE         ICERS AND DIRECTO         Change         Change	RS IN 12 Additio
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TY-ST-ZIP     54 CITY-ST-ZIP       DELETE     6.1 TITLE       ME     6.2 NAME       6.2 NAME       6.3 CITEST NDDDESS	SUITE 100 MIAMI FL 33156	, or both, in the State c and accept the obligati orinted name of registered agent OFFICERS AND MARTIELE P STH ST., A1-101	of Florida ions of, S t and title if a	A. Such change was an Section 607.0505, Flor applicable. (NOTE: CTORS DELETE	84     City       es, the above-named corruthorized by the corporatina Statutes.       Registered Agent signature requiring       13.       1.1 TITLE       1.2 NAME       1.3 STREET ADDRESS       1.4 CITY-ST-ZIP       2.1 TITLE       2.2 NAME       2.3 STREET ADDRESS       2.4 CITY-ST-ZIP       3.1 TITLE       3.2 NAME       3.3 STREET ADDRESS       3.4. CITY-ST-ZIP       4.1 TITLE       4.2 NAME       4.3 STREET ADDRESS       3.4. CITY-ST-ZIP       4.1 TITLE       4.2 NAME       4.3 STREET ADDRESS       4.4 CITY-ST-ZIP       5.1 TITLE	red when reinstating)	FL         uurpose of changing its the appointment as reg         DATE         ICERS AND DIRECTO         Change         Change         Change         Change         Change         Change         Change	RS IN 12 Additio
LE DELETE 61 TITLE Change Addition	SUITE 100 MIAMI FL 33156	, or both, in the State c and accept the obligati orinted name of registered agent OFFICERS AND MARTIELE P STH ST., A1-101	of Florida ions of, S t and title if a	A. Such change was an Section 607.0505, Flor applicable. (NOTE: CTORS DELETE	84     City       es, the above-named corruthorized by the corporatina Statutes.       Registered Agent signature requiring       13.       1.1 TITLE       1.2 NAME       1.3 STREET ADDRESS       1.4 CITY-ST-ZIP       2.1 TITLE       2.2 NAME       2.3 STREET ADDRESS       2.4 CITY-ST-ZIP       3.1 TITLE       3.2 NAME       3.3 STREET ADDRESS       3.4 CITY-ST-ZIP       4.1 TITLE       4.2 NAME       4.3 STREET ADDRESS       4.4 CITY-ST-ZIP       5.1 TITLE       5.1 TITLE       5.1 TITLE       5.2 NAME	red when reinstating)	FL         uurpose of changing its the appointment as reg         DATE         ICERS AND DIRECTO         Change         Change         Change         Change         Change         Change         Change	RS IN 12 Additio
MC calculation of the second	SUITE 100 MIAMI FL 33156	, or both, in the State c and accept the obligati orinted name of registered agent OFFICERS AND MARTIELE P STH ST., A1-101	of Florida ions of, S t and title if a	A. Such change was an Section 607.0505, Flor applicable. (NOTE: CTORS DELETE	84     City       es, the above-named corruthorized by the corporatina Statutes.       Registered Agent signature requiring       13.       1.1 TITLE       1.2 NAME       1.3 STREET ADDRESS       1.4 CITY-ST-ZIP       2.1 TITLE       2.2 NAME       2.3 STREET ADDRESS       2.4 CITY-ST-ZIP       3.1 TITLE       3.2 NAME       3.3 STREET ADDRESS       3.4 CITY-ST-ZIP       4.1 TITLE       4.2 NAME       4.3 STREET ADDRESS       4.4 CITY-ST-ZIP       5.1 TITLE       5.1 TITLE       5.2 NAME       5.3 STREET ADDRESS       4.4 CITY-ST-ZIP       5.1 TITLE       5.3 STREET ADDRESS       4.3 STREET ADDRESS       4.4 CITY-ST-ZIP	red when reinstating)	FL         uurpose of changing its the appointment as reg         DATE         ICERS AND DIRECTO         Change         Change         Change         Change         Change	RS IN 12 Additio
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Invest-zip       64 CITY-ST-ZiP         4. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an appeare in	SUITE 100 MIAMI FL 33156	, or both, in the State c and accept the obligati orinted name of registered agent OFFICERS AND MARTIELE P STH ST., A1-101	of Florida ions of, S t and title if a	A. Such change was an Section 607.0505, Flor applicable. (NOTE: CTORS DELETE DELETE	84       City         es, the above-named corruthorized by the corporating Statutes.       Image: Corporating Statutes and Statutes.         Registered Agent signature required a Statutes.       Image: Corporating Statutes and Statutes.         13.       1.1 TITLE         12. NAME       Image: Corporating Statutes and Statutes.         14. CITY-ST-ZIP       Image: Corporating Statutes and Statutes.         2.1 TITLE       Image: Corporating Statutes and Statutes.         2.1 TITLE       Image: Corporating Statutes and Statutes.         2.1 TITLE       Image: Corporating Statutes and Statutes.         3.1 TITLE       Image: Corporating Statutes and Statutes.         4.1 TITLE       Image: Corporating Statutes and Statutes.	red when reinstating)	FL         uurpose of changing its the appointment as reg         DATE         ICERS AND DIRECTO         Change         Change         Change         Change         Change         Change         Change         Change         Change         Change	RS IN 12 Additio