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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 officer or director of the corporation or the receiver or trastee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in	office or r agent. I a NATURE	registered agent, or both Im familiar with, and acc Signature, typed or printed nam (PD ROSSITER, RICHAI C/O 3728 S.W. 64 DAVIE FL 33314	h, in the State of Florida cept the obligations of, S DFFICERS AND DIREC RD TH AVENUE	Section 607.0505, Flor pplicable. (NOTE: TORS DELETE DELETE DELETE DELETE DELETE DELETE DELETE DELETE	A STRET ADDRESS 3.4 CTY-ST-ZIP 3.1 TTLE 3.2 NAME 3.3 STRET ADDRESS 3.4 CTY-ST-ZIP 3.1 TTLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CTY-ST-ZIP 3.1 TTLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CTY-ST-ZIP 3.1 TTLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CTY-ST-ZIP 4.1 TTLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CTY-ST-ZIP 6.1 TTLE 6.2 NAME 6.3 STREET ADDRESS 5.4 CTY-ST-ZIP	poration submits this statement for the purpos- ion's board of directors. I hereby accept the ap ed when reinstaling) DATE	Change	RS IN 12 Additio
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