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

CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

	Secretary of State DIVISION OF CORPORATIONS						
DOCU 1. Corporation	MENT # P94	0000210)42 (4	-)			
1 '	ESTMENTS, INC.						
11 1141						I KA BIJIKON JID KAND DADA BANJA DAKI	BOIR BOIR WAS IN A COMMENT OF THE COMMENT
		··					
Principal Place of Business Mailing Address					r and reast statement all by Entit Chili	Annii maira ishai cidii massi bsain idds sadi	
SUITE 200. BUILDING TWO SUITE 200. BUILDING TO SUITE				L HWY,			
						 Date Incorporated or Qualified 03/18/1994 	3a. Date of Last Report 08/11/1995
2. Principal Pl	lace of Business	2a. Mailin	g Address			4. FEI Number	Applied For
21		26	[26]			APPLIED FOR	Not Applicable
Suite, Apt.	#, etc.	F	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional
City & State	0		[27]				L.J Fee Required
23		F 7	Crty & State			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
Zip	Zip Country		Zip				Added to Fees
24				Gountry 30		8. This corporation has liability for intangible tax under s 199.032, Florida Statutes Yes X No	
	9. Name and Address of (Current Registered /	\gent	81		10. Name and Address of New R	egistered Agent
BLDG. 2	ORTH FEDERAL HWY 2 SUITE 200 AUDERDALE FL 33306		83 84 City			ress (P.O. Box Number is Not Acceptab	
					•		FL 85 Zip Code
11. Pursuant t or register familiar wit	to the provisions of Sections 60 ed agent, or both, in the State of th, and accept the obligations of	7.0502 and £07.1508, of Florida. Such chang f, Section 607.0505, f	Florida Statute e was authorize lorida Statutes	es, the above need by the corpo	amed corpor ration's boa	ration submits this statement for the pur rd of directors. I hereby accept the appo	pose of changing its registered office pintment as registered agent. I am
SIGNATURE							
12.	Signature, typed or printed he me of register OFFICE F	RS AND DIFFECTORS	(NO)	*E Begistered Agent 13.	signature require		DATE
TOTLE	D		[]] DELETE		Т	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12 Change Addition
NAME	SANTANGELO, CARL G						C Ollarge C Addition
STREET ADDRESS 3000 N. FEDERAL HWY., STE.		., STE. 200 - BLDO	200 - BLDG. 2		DDRESS		
CITY-ST-ZIP	PARTILINERS DI AAA-A				- ZIP		
TITLE	☐ DELE] DELETE	2 13HLE			Change Addition
NAME			2.2 NAME				
STREET ADDRESS			2.3 STREET A	DDRESS			
CITY-ST-ZIP				24 CHTY-ST	-71P		
TITLE	DETELE		3 1 THILE			Change Addition	
NAME			3.2 NAME				
STREET ADDRESS				33 STREET	ADDRESS		
CITY-ST-ZIP TITLE	Filhtim			3.4 CHY-S1	- ZIP		
NAME	[] DELETE		4 1 TIFLE			Change Addition	
STREET ADDRESS				4.2 NAME	DODESO		
CITY-ST-ZIP				4.3 STREET A			
TITLE	The second secon) DELETE	4.4 CITY-ST- 5.1 TITLE	ZIP		Change Addition
NAME .		_		52 NAME			Change Addition
STREET ADDRESS				5.3 STREET A	nnarss		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 3 if grianged, or on an attachment with impeddinges.

6.4 CITY - S1 - ZIP

54 CiTY-ST-ZIP

6.3 STREET ADDRESS

6 1 Table

6.2 NAME

DELE IE

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

SIGNATURE AND TYPED OR PRITIED NAME OF SIGNING OFFICED OR DIRECTOR
Carl G. Santangelo

305-561-3040

Change

Addition