## 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

1. Corporation	MENT # P9400 NG EDGE CUSTOM DESIG								
Principal Piace of Business Mailing Address				_,				\$8.0\$8.0\$80.0001	
260 NW 2ND DEERFIELD B	ST BEACH FL 33341	260 NW 2ND ST Deerfield beach fi	L 33341						
					3. Date Incorporated or Qualified	1	of Last Re	•	
• Dringing Dr	ice of Business	2a. Mailing Address			03/14/1994 4. FEI Number		8/24/199	pplied For	
1		26				1		lot Applicable	
Suite, Apt. #	, etc.	Suite, Apt. #, etc.				<b>\$8.75</b> Addi			
		27			5. Certificate of Status Desireo	<u></u>	Fee P	Required	
City & State		City & State			6. Election Campaign Financing			May Be	
3	Country	28	Counts		1 rust Fund Contribution			to Fees	
Zip 4	Country 25	Z(p)	Country 30	у	8. This corporation has liability for Florida Statutes ☐ Yes	intangible ta : No	ak unider S	130.062,	
1	9. Name and Address of Curre		1001		10. Name and Address of New I		Agent		
			81	Name					
NAVARRA, BARRY A				Street	Address (P.O. Box Number is Not Acceptal	ddress (P.O. Box Number is Not Accentable)			
10795 EUREKA ST									
	IATON FL 33428		83						
			84	City			<b>85</b> Zip	Code	
				1	orporation submits this statement for the puboard of directors. I hereby accept the app	FL	<b>.</b>     `		
SIGNATURE _	Signature, typed or printed name of registerist age OFFICERS AN	NO DIRECTORS	OTE Begistered Aur	nt signative r	examed when recessional ADDITIONS/CHANGES TO OFF				
IILE	D	DELETE	1 1 TrTLE				Change	Control Addition	
VAME	NAVARRA, BARRY A		1.2 NAME						
STREET ADDRESS	10795 EUREKA ST			1 ADDRESS					
DITY - ST - ZIP	BOCA RATON FL 33428	☐) DELETE	2 1 TILLE				Change	☐ Addition	
HLE IAME	D Navarra, Ronald P	ال مددداد	2 1 11.LE 2 2 NAME		NAVARRA ROLLED P.		Di Changs	Land Addition	
STREET ADDRESS	22580 LANYARD ST			CRAPTICA T	NAVAERA RONALD P. 771 SIESTA KEY TRAIL	·			
OTY - ST-ZIP	BOCA RATON FL 33428		2.4 CHY -		Deth FIELD BCA. FI. 334	141			
TILE		DELETE	3 1 TIFLE				☐ Change	☐ Addition	
NAME			3.2 NAME						
STREET ADDRESS			33 STRE	ET ADDRESS					
) 1v - \$1 - 7 P			3 4 CITY						
ITLE		☐ DELFIE	4 1 100.6				Change	☐ Addition	
IAME			4.2 NAMĘ						
STREET ADDRESS				T ADDRESS					
ITY - ST - ZIP		DELETE	4.4 CITY -				Change	Addition	
ITLE NAME		C presid	5 1 TITLE 5 2 NAME				car.go		
IAME STREET ADORESS				E1 ADDRESS					
CITY - ST - ZIP			5 4 CITY -						
litte Litte		DELETE	6 1 1111				☐ Change	Addition	
NAME		-	6.2 NAME				-		
STREET ADDRESS				ET ADDRESS					
C-TY - ST - ZIP	İ		6 4 CHY-		1				

14. Too 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 13 if changed, or on an attachment with an address.

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/11/96 35-428-6124