	INUAL REPORT 1997		ER MAY 1 IS \$550.00 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS			Apr 11 1997 8:00an Secretary of State			
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STERN, HOWARD L 7601 EAST TREASURE DRIVE SUITE 2106 NORTH BAY VILLAGE FL 33141 01 01 Name 10 Pursuant to the provisions of Soctions 607 0602 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its office or registered agent, or both, in the State of Florida. Statutes, the above-named corporation's board of directors. I hereby accept the appointment as re agent 1 and familiar with, and accept the obligations of. Soction 607.0506, Florida Statutes. 183 GNATURE OFFICERS AND DIRECTORS 19. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 2 OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 2 OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 2 OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 2 OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 4 DISTERN, HOWARD L 12.NAWE 23. 4 DELETE 11.TITLE 24.000 4 DELETE 21.TITLE Change 4 DELETE 11.TITLE Change 4 DELETE 33.STREET ADDRESS 14.CIT-ST-2P 4 DELETE 11.TITLE Change 4 DELETE 33.STREET ADDRESS 4 DELETE <t< td=""><td>25</td><td>29</td><td></td><td> í</td><td></td><td>Florida Statutes</td><td>Yes</td><td>No</td><td>. 199.032,</td></t<>	25	29		í		Florida Statutes	Yes	No	. 199.032,
7601 EAST TREASURE DRIVE SUITE 2106 NORTH BAY VILLAGE FL 33141 istreet Address (P.O. Box Number is Not Acceptable) 83 istreet Address (P.O. Box Number is Not Acceptable) 84 City FL 65 Zip Co 85 City FL 65 Zip Co 84 City FL 65 Zip Co 86 City FL 65 Zip Co 87 City FL 65 Zip Co 88 City the above-named corporation submits this statement for the purpose of changing its agent to the purpose of changing its age	······	Iress of Current Register	red Agent	81 Na	me	10. Name and Address of New Re	gistered /	Agent	
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Pursuant to the provisions of Soctions 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its office or registeric a 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 reagent 1 am familiar with, and accept the obligations of, Soction 607,0505, Florida Statutes. SNATURE SNATURE Description: Spectra prenderhame of register and the displaceme OFFICERS AND DIRECTORS D OFFICERS AND DIRECTORS I OUTOR Registered Agent agranter resulted when reneating) D OFFICERS AND DIRECTORS E D D D D D D D D D D D D D D D D D D		CL 00144				· · · · · · · · · · · · · · · · · · ·			
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6.4 CITY-ST-ZIP . I do 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	ESS		DELETE	5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDF	ESS			Change	Additio
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 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 na appears in Block 12 or Block 13 if changed, or on aparttachment with an address.	1 55 155 1655	mation supplied with this		5.4 CITY - ST - ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDF 6.4 CITY - ST - ZIP		in Section 119.07(3)(i). Florida Statute			

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