	COR ANNL	PROFIT PORATIC JAL REPO 1996	ORT S		Secret DIVISION OF	a B. Morthan tary of State CORPORA	n					
	OCUI	NENT	# P94	00002	3339 (2)	)						
	HCCM	CORP.									_	
Prin	cipal Place	of Business		Mail	ling Address				<b></b>	EIII <b>an in 1199</b> 0 (		<b>                              </b>
	I EUCLID				21 EUCLID AVENUE MPA FL 33629							
								3. Date Incorporated or 03/28/1994	Qualified	3a. Date o 08/1	Last R 1/199	•
	Principal Pla	ace of Busine	ess		Mailing Address			4. FEI Number			Ţ,	Applied For
	Suite, Apt. :	#, etc.		26	Suite, Apt. #, etc.			59-3233049			<u> </u>	Not Applicable Additional
2	No. 0. 01		· · · ·	27			· · · ·	5. Certificate of Status D			Feel	Required
3] 3]	Dity & State	÷		28	City & State			6. Election Campaign Fir Trust Fund Contributio	0			0 May Be d to Fees
	'np		Country 25		Zip	Cour	ntry	8. This corporation has I	iability for in			
<u>'</u> 1	<u> </u>			29 f Current Registe	ered Agent	30		Florida Statutes 10. Name and Address	-		ent	
							81 Name					
		n, mark Clid aveni	UF			ſ	82 Street Add	Iress (P.O. Box Number is Not	Acceptable	e)		
	TAMPA F		02			-	83					
							84 City			EI	85 Zip	o Code
11.	Pursuant t	o the provisio	ons of Sections 6	07.0502 and 607.	1508, Florida Statuti	es, the abov	/e named corpo	pration submits this statement t	for the purp	FL xose of chance	ioa its r	enistered office
1.	Pursuant t or registeri familiar wit	to the provision ad agent, or lith, and accept	ons of Sections 6 both, in the State of the obligations	07.0502 and 607, a of Florida. Such c of, Section 607.05	1508, Florida Statut change was authoriz 505, Florida Statutes	es, the abov	/e named corpo	pration submits this statement i ard of directors. I hereby accep	for the purp ot the appoi	FL xose of chance	ioa its r	enistered office
1.	or registeri familiar wit NATURE	ed agent, or l th, and accep	both, in the State of the obligations	07.0502 and 607. e of Florida. Such c of, Section 607.05 tered agent and title if app	change was authoriz 505, Florida Statutes	es, the aboved by the cost	/e named corpo	ard of directors. I hereby accep	for the purp ot the appoi	FL xose of chance	ioa its r	enistered office
11. Sigi	or registeri familiar wit	ed agent, or th, and accep Signature, typed o	both, in the State of the obligations	e of Florida. Such c of, Section 607.05	change was authoriz 505, Florida Statutes nicable (NC ORS	es, the aboved by the cost of the second sec	/e-named corpo orporation's boa	ard of directors. I hereby accep	ot the appoi	DATE	ing its rigistered	egistered office agent. I am RS IN 12
1. Sigi	or registeri familiar wit	ed agent, or th, and accep Signature, typed o	both, in the State of the obligations or printed name of regis OFFIC	e of Florida, Such o of, Section 607.05	change was authoriz 505, Florida Statutes nicable (NC	es, the aboved by the cost. DTE: Registered a 13. 1 1 Till	Agent's gnature require	ard of directors. I hereby accep ed when revistating)	ot the appoi	DATE	ing its r gistered	egistered office agent. I am
<b>1</b> . <b>2</b> . IILE	or registeri familiar wit	PS HAMPTO 3121 EU	both, in the State of the obligations or printed name of regis OFFICI N, MARK CLID AVENUE	e of Florida, Such o of, Section 607.05	change was authoriz 505, Florida Statutes nicable (NC ORS	es, the aboved by the constraints of the constraint	Agent's gnature require	ard of directors. I hereby accep ed when revistating)	ot the appoi	DATE	ing its rigistered	egistered office agent. I am RS IN 12
<b>1</b> . <b>2</b> . IILE AME TREE	or register familiar wit NATURE TADDRESS ST-ZIP	ed agent, or i th, and accep Signature, typed o PS HAMPTO	both, in the State of the obligations or printed name of regis OFFICI N, MARK CLID AVENUE	e of Florida, Such o of, Section 607.05	ohange was authoriz 505, Florida Statutes okable NC ORS DELÉTE	DTE Registered J 13. 14. 14. 14. 14. 14. 14. 14. 14	Agent signature require LE ME LEFT ADDRESS Y-ST-ZIP	ard of directors. I hereby accep ed when revistating)	ot the appoi	DATE DATE CERS AND D	ing its r gistered RECTO Change	egistered office agent. I am RS IN 12 Addition
<b>1</b> . <b>2</b> . ITLE AME TREE ITY-	or register familiar wit NATURE TADDRESS ST-ZIP	PS HAMPTO 3121 EU	both, in the State of the obligations or printed name of regis OFFICI N, MARK CLID AVENUE	e of Florida, Such o of, Section 607.05	change was authoriz 505, Florida Statutes nicable (NC ORS	BS, the above ted by the cost DTE: Registered 2 13. 1 1 Till 12 NAI 13 STF 1.4 CIT 2. 1 Till 2. 1 Till	Agent sgnature require Agent sgnature require ILE ME IEET ADDRESS Y-ST-ZIP LE	ard of directors. I hereby accep ed when revistating)	ot the appoi	DATE DATE CERS AND D	ing its rigistered	egistered office agent. I am RS IN 12
<b>1</b> . <b>1</b> . <b>2</b> . <b>1</b> LE <b>A</b> ME <b>1</b> LF <b>A</b> ME	or register familiar wit NATURE TADDRESS ST-ZIP	PS HAMPTO 3121 EU	both, in the State of the obligations or printed name of regis OFFICI N, MARK CLID AVENUE	e of Florida, Such o of, Section 607.05	ohange was authoriz 505, Florida Statutes okable NC ORS DELÉTE	es, the above red by the cost of the second second second 13. 1 1 1111 1.2 NAI 1.3 STF 1.4 CrT 2. 1 Tr1 2.2 NAI	Agent sgnature require Agent sgnature require ILE ME IEET ADDRESS Y-ST-ZIP LE	ard of directors. I hereby accep ed when revistating)	ot the appoi	DATE DATE CERS AND D	ing its r gistered RECTO Change	egistered offici agent. I am RS IN 12 Addition
1. IGN 2. ILE AME ITY- ILE ITY- IREE ITY-	or register familiar wit NATURE T ADORESS ST-7/P	PS HAMPTO 3121 EU	both, in the State of the obligations or printed name of regis OFFICI N, MARK CLID AVENUE	e of Florida, Such o of, Section 607.05	nkable was authoriz 505, Florida Statutes nkable MC ORS DELETE	es, the above red by the costs. DTE: Registered 7 13. 1 1 TH 1.2 NAI 1.3 STF 1.4 CH 2.1 TH 2.2 NAI 2.3 STF 2.4 CH	Agent signature require Agent signature require ILE ME IEET ADDRESS Y-ST-ZIP IEF ME REET ADDRESS Y-ST-ZIP	ard of directors. I hereby accep ed when revistating)	ot the appoi	PL pose of chang intment as re- DATE CERS AND D DATE	ing its n gistered IRECTO Change	egistered offica agent. I am RS IN 12 Addition
1. 51G1 2. 11LE AME 1TY - 1TLE 1TLE	or register familiar wit NATURE T ADDRESS ST-ZIP	PS HAMPTO 3121 EU	both, in the State of the obligations or printed name of regis OFFICI N, MARK CLID AVENUE	e of Florida, Such o of, Section 607.05	ohange was authoriz 505, Florida Statutes okable NC ORS DELÉTE	es, the above red by the ciss. TE: Registered 7 13. 1 1 111 12 NAI 13 STF 14 DT 2 1 Til 2 2 NAI 2 3 STF 2 4 CIT 3. 1 111	Agent signature require Agent signature require TLE ME HEET ADDRESS Y-ST-ZIP LF ME HEET ADDRESS Y-ST-ZIP LE LE LE	ard of directors. I hereby accep ed when revistating)	ot the appoi	PL pose of chang intment as re- DATE CERS AND D DATE	ing its r gistered RECTO Change	egistered offici agent. I am RS IN 12 Addition
1. SIGN 2. IILE AME ITLE AME	or register familiar wit NATURE T ADDRESS ST-ZIP	PS HAMPTO 3121 EU	both, in the State of the obligations or printed name of regis OFFICI N, MARK CLID AVENUE	e of Florida, Such o of, Section 607.05	nkable was authoriz 505, Florida Statutes nkable MC ORS DELETE	es, the above ted by the costs. TE: Registered J 13. 1 1 Till 1 2 NAI 2 1 Till 2 2 NAI 2 3 STF 2 4 CIT 3 1 TIL 3 2 NAI	Agent signature require Agent signature require TLE ME HEET ADDRESS Y-ST-ZIP LF ME HEET ADDRESS Y-ST-ZIP LE LE LE	ard of directors. I hereby accep ed when revistating)	ot the appoi	PL pose of chang intment as re- DATE CERS AND D DATE	ing its n gistered IRECTO Change	egistered offica agent. I am RS IN 12 Addition
1. SIGN 2. TREE TY- TREE TY- TLE AME IREE ITY-	or register familiar wit NATURE 1 ADORESS SI-7/P	PS HAMPTO 3121 EU	both, in the State of the obligations or printed name of regis OFFICI N, MARK CLID AVENUE	e of Florida, Such o of, Section 607.05	nkable was authoriz SO5, Florida Statutes NKABLE INC ORS DELETE DELETE DELETE	es, the above red by the costs. TE: Registered J 13. 1 1 Till 12 NAI 1 3 STF 14 CFT 2. 1 Till 2.3 STF 2.4 CFT 3. 1 Till 3.2 NAI 3.3 STI	Agent signature require Agent signature require ILE ME IEET ADDRESS Y-ST-ZIP LE KEET ADDRESS Y-ST-ZIP LE ME KEET ADDRESS Y-ST-ZIP LE ME	ard of directors. I hereby accep ed when revistating)	ot the appoi	PL pose of chang intment as re- DATE CERS AND D DATE	ing its n gistered IRECTO Change	egistered offica agent. I am RS IN 12 Addition
1. SIGN 2. IILE AME ITY- ITE AME ITY- ITE AME ITY- ITE	or register familiar wit NATURE	PS HAMPTO 3121 EU	both, in the State of the obligations or printed name of regis OFFICI N, MARK CLID AVENUE	e of Florida, Such o of, Section 607.05	nkable was authoriz 505, Florida Statutes nkable MC ORS DELETE	es, the above red by the cr s. <b>13.</b> 1 1 111 1 2 NAI 1 3 STF 1 4 CrT 2 2 NAI 2 3 STF 2 4 CrT 3 1 171 3 2 NAI 3 3 STI 3 4 CrT 4 1 171	Agent signature require Agent signature require ILE ME IEF ADDRESS Y - ST - ZIP LE ME REET ADDRESS Y - ST - ZIP LE ME REET ADDRESS Y - ST - ZIP LE ME REET ADDRESS Y - ST - ZIP LE ME	ard of directors. I hereby accep ed when revistating)	ot the appoi	DATE DATE DATE DERS AND D	ing its n gistered IRECTO Change	egistered offica agent. I am RS IN 12 Addition
1. SIGN 2. TLE AME TY- TLE AME ITY- TLE AME	or register familiar wit NATURE	PS HAMPTO 3121 EU	both, in the State of the obligations or printed name of regis OFFICI N, MARK CLID AVENUE	e of Florida, Such o of, Section 607.05	nkable was authoriz SO5, Florida Statutes NKABLE INC ORS DELETE DELETE DELETE	es, the above ted by the cost s. T13. 1 1 Till 1 2 NAI 1 3 STF 1 4 CrT 2 1 Till 2 2 NAI 2 4 CrT 3 1 Till 3 2 NAI 3 3 STI 3 4 CrT 4 1 Till 4 2 NAI	Agent signature require Agent signature require ILE ME IEF ADDRESS Y - ST - ZIP LE ME REET ADDRESS Y - ST - ZIP LE ME REET ADDRESS Y - ST - ZIP LE ME REET ADDRESS Y - ST - ZIP LE ME	ard of directors. I hereby accep ed when revistating)	ot the appoi	DATE DATE DATE DERS AND D	ing its r gistered IRECTO Change Change	egistered office agent. I am RS IN 12 Addition
1. IGN ILE AME ITY ILE AME IREE IREE IREE IREE ITY-	or register familiar wit VATURE	PS HAMPTO 3121 EU	both, in the State of the obligations or printed name of regis OFFICI N, MARK CLID AVENUE	e of Florida, Such o of, Section 607.05	hange was authoriz 505, Florida Statutes Note: Note:	es, the above ted by the cost s. DTE Registered / 13. 1 1 Till 12 NAI 13 STF 1.4 CIT 2.1 Till 2.2 NAI 3.3 STF 3.4 CIT 4.1 Till 4.2 NAI 4.3 STF	Agent signature require Agent signature require ILE ME IEF ADDRESS Y - ST - ZIP LE KEET ADDRESS	ard of directors. I hereby accep ed when revistating)	ot the appoi	DATE DATE DATE DERS AND D	ing its r gistered IRECTO Change Change	egistered offica agent. I am RS IN 12 Addition
1. SIGN 2. TLE AME TREE ITLE AME ITLE ITLE ITLE	or register familiar wit NATURE	PS HAMPTO 3121 EU	both, in the State of the obligations or printed name of regis OFFICI N, MARK CLID AVENUE	e of Florida, Such o of, Section 607.05	nkable was authoriz SO5, Florida Statutes NKABLE INC ORS DELETE DELETE DELETE	es, the above ted by the costs of the second of the costs of the second of the costs of the second of the costs of the cos	Agent signature require Agent signature require ILE ME ILE ME ILE ILE ILE ILE ILE ILE ILE ILE ILE IL	ard of directors. I hereby accep ed when revistating)	ot the appoi		ing its r gistered IRECTO Change Change	egistered office agent. I am RS IN 12 Addition
1. IGN ILE AME ITE AME IREE IREE IREE IREE IREE IREE IREE IREE	or register familiar wit NATURE	PS HAMPTO 3121 EU	both, in the State of the obligations or printed name of regis OFFICI N, MARK CLID AVENUE	e of Florida, Such o of, Section 607.05	hange was authoriz 505, Florida Statutes Note: Note:	es, the above red by the costs. TE Registered / 13. 1 1 Till 12 NAI 13 STF 14 CTT 2 1 Till 2 NAI 23 STF 24 CTT 3 1 Till 32 NAI 33 STF 44 CTT 5 1 TIL 52 NAI	re-named corpo           orporation's boa           Agent signature require           ILE           ME           ILE           ME           ILE           V-ST-ZIP           ILE           WE           REET ADDRESS           Y-ST-ZIP           ILE           WE           ME           ME	ard of directors. I hereby accep ed when revistating)	ot the appoi		IRECTO Change Change Change	egistered office agent. I am RS IN 12 Addition
1. IGN ILE AME ITY ILE IREE IREE IREE IREE IREE IREE IREE IREE	or register familiar wit VATURE _ I ADDRESS SI-7/P I ADDRESS SI-7/P I ADDRESS SI-7/P I ADDRESS SI-7/P	PS HAMPTO 3121 EU	both, in the State of the obligations or printed name of regis OFFICI N, MARK CLID AVENUE	e of Florida, Such o of, Section 607.05	hange was authoriz 505, Florida Statutes Note: Note:	es, the above red by the cr s. DTE Registered / 13. 1 1 Till 1 2 NAI 1 3 STF 2 4 CIT 3 1 TIL 2 NAI 3 4 CIT 4 1 TIL 4 2 NAI 4 3 STF 4 4 CIT 5 1 TIL 5 3 STF	Agent signature require Agent signature require ILE ME ILE ME ILE ILE ILE ILE ILE ILE ILE ILE ILE IL	ard of directors. I hereby accep ed when revistating)	ot the appoi		IRECTO Change Change Change	egistered office agent. I am RS IN 12 Addition
1. ane reserved reserve	or register familiar wit VATURE T ADDRESS ST-7/P T ADDRESS ST-7/P T ADDRESS ST-7/P T ADDRESS ST-7/P T ADDRESS ST-7/P	PS HAMPTO 3121 EU	both, in the State of the obligations or printed name of regis OFFICI N, MARK CLID AVENUE	e of Florida, Such o of, Section 607.05	hange was authoriz 505, Florida Statutes Note: Note:	es, the above red by the cr s. DTE Registered / 13. 1 1 Till 12 NAI 13 STF 14 CIT 2 1 Till 22 NAI 23 STF 24 CIT 3 1 TIL 32 NAI 33 STF 44 CIT 5 1 TIL 52 NAI 53 STF 54 CIT 6 1 TIL	re-named corpo           orporation's boa           Agent signature require           ILE           ME           ILE           ME           REET ADDRESS           Y - ST - ZIP           LE           ME           REET ADDRESS           Y - ST - ZIP           LE           ME           REET ADDRESS           Y - ST - ZIP           LE           ME           REET ADDRESS           Y - ST - ZIP           LE           ME           REET ADDRESS           Y - ST - ZIP           LE           ME           REET ADDRESS           Y - ST - ZIP           LE           ME           REET ADDRESS           Y - ST - ZIP           LE           ME           REET ADDRESS           Y - ST - ZIP           LE           ME           REET ADDRESS           Y - ST - ZIP           LE	ard of directors. I hereby accep ed when revistating)	ot the appoi		IRECTO Change Change Change	egistered office agent. I am RS IN 12 Addition
1. SIGN 2. ITLE AME ITY- ITLE AME ITLE AME ITLE AME ITLE AME	or register familiar wit VATURE	PS HAMPTO 3121 EU	both, in the State of the obligations or printed name of regis OFFICI N, MARK CLID AVENUE	e of Florida, Such o of, Section 607.05	Shange was authoriz SO5, Florida Statutes Incable INC ORS DELETE DELETE DELETE DELETE DELETE	es, the above red by the cr s. DTE Registered / 13. 1 1 Till 12 NAI 13 STF 14 CrT 2. 1 Till 22 NAI 23 STF 24 CrT 3. 1 Till 32 NAI 33 STF 44 CrT 5 1 Till 52 NAI 53 STF 54 CrT 6 1 Till 6 2 NAI	re-named corpo           orporation's boa           Agent signature require           LE           ME           KEET ADDRESS           Y - ST - ZIP           LE           ME           REET ADDRESS           Y - ST - ZIP           LE           WE           REET ADDRESS           Y - ST - ZIP           LE           WE           REET ADDRESS           Y - ST - ZIP           LE           WE           REET ADDRESS           Y - ST - ZIP           LE           WE           REET ADDRESS           Y - ST - ZIP           LE           WE           REET ADDRESS           Y - ST - ZIP           LE           WE           KEE 1 ADDRESS           Y - ST - ZIP           LE           ME           KEE 1 ADDRESS           Y - ST - ZIP           LE	ard of directors. I hereby accep ed when revistating)	ot the appoi		ing its r gistered RECTO Change Change Change Change	egistered office agent. I am RS IN 12 Addition Addition
IT.E	or register familiar wit VATURE T ADDRESS ST-7/P T ADDRESS ST-7/P T ADDRESS ST-7/P T ADDRESS ST-7/P T ADDRESS ST-7/P	PS HAMPTO 3121 EU	both, in the State of the obligations or printed name of regis OFFICI N, MARK CLID AVENUE	e of Florida, Such o of, Section 607.05	Shange was authoriz SO5, Florida Statutes Incable INC ORS DELETE DELETE DELETE DELETE DELETE	es, the above ted by the costs. TE: Registered J 13. 1 1 Till 12 NAI 13 STF 14 DT 2 1 Till 2 NAI 2 3 STF 2 4 CIT 3 1 TIL 3 2 NAI 3 3 STI 3 4 CIT 4 1 TIL 4 2 NAI 4 3 STF 4 4 CIT 5 1 TIL 5 2 NAI 5 3 STF 5 4 CIT 6 1 TIL 6 3 STF	re-named corpo           orporation's boa           Agent signature require           ILE           ME           ILE           ME           REET ADDRESS           Y - ST - ZIP           LE           ME           REET ADDRESS           Y - ST - ZIP           LE           ME           REET ADDRESS           Y - ST - ZIP           LE           ME           REET ADDRESS           Y - ST - ZIP           LE           ME           REET ADDRESS           Y - ST - ZIP           LE           ME           REET ADDRESS           Y - ST - ZIP           LE           ME           REET ADDRESS           Y - ST - ZIP           LE           ME           REET ADDRESS           Y - ST - ZIP           LE           ME           REET ADDRESS           Y - ST - ZIP           LE	ard of directors. I hereby accep ed when revistating)	ot the appoi		ing its r gistered RECTO Change Change Change Change	egistered office agent. I am RS IN 12 Addition Addition
1. SIGN 2. IILE AME TREE ITY- IILE AME ITY- IILE AME ITY- IILE AME ITY- IILE AME ITY- IILE AME IITY- IILE IITY- IILE IITY- IILE IITY- IILE IITY- IILE IITY- IILE IITY- IILE IITY- IILE IITY- IILE IITY- IILE IITY- IILE IITY- II IITY- II IITY- II II II II II II II II II II II II II	or register familiar wit VATURE	ed agent, or i th, and accept Signature, typed of PS HAMPTO 3121 EU TAMPA F	both, in the State of the obligations of printed name of regs OFFICI N, MARK CLID AVENUE	upplied with this fil	horize was authorized statutes  ficable  ORS  DELETE	es, the above ted by the criss. TE Registered J 13. 1 1 Till 12 NAI 13 STF 14 DTT 2 1 Till 2 2 NAI 2 3 STF 2 4 CIT 3 1 TIL 3 2 NAI 3 3 STI 3 4 CIT 4 1 TIL 4 2 NAI 4 3 STF 4 4 CIT 5 1 TIL 5 3 STF 5 4 CIT 6 1 TIL 6 1 TIL 6 3 STF 6 4 CIT	ve-named corpo           opporation's boa           Agent signature require           LE           ME           LEF ADDRESS           Y-ST-ZIP           LE           ME           LEF ADDRESS           Y-ST-ZIP           LE           ME           REET ADDRESS           Y-ST-ZIP	ard of directors. I hereby accep ed when revistating)	S TO OFFIC		IRECTO Change Change Change Change Change Change	egistered office agent. I am RS IN 12 Addition Addition Addition Addition Addition