PROFIT CORPORATION ANNUAL'REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of Sts A DIVISION OF CORPORATIONS

1996

SIGNATURE: _

BIGNATURE AND TYPED OR PRINTED NAME OF BIGHING OFFICER OR DIRECTOR

DOCUMENT # P94 0000 27209													
The Other Image, Inc.													
			_										
rincipel Place of Business Mailing Address													
360 S.	Militar	y Trail	P.O	. Box 23	398								
Deerfield Beach, FL 33442 Ft. Lauderdale, FL 33303									. Date incom	orated or Qualific	M 30. n	ate of Last Ri	ecort .
												BIO OF EUST TH	oport
Principal Place of Business				28. Mailing Address					FEI Numbe	564289	,		Applied For
Suite, Apt. #, etc.				Suite, Apt. #, etc.							$\overline{}$		Not Applicable Additional
Conta, Ppt. W. Bio.				27					• Certificate	of Status Desired	J2	+	Required
City & State				City & State					6. Election Compelian Financing \$5.00 May Be Trust Fund Contribution Added to Fees				
Zip • Country			28	Zip Country						ration has liability			199.032,
25			29	29 30					Florida Stat	tutes 🔲	Yes Mo		
	9. Nam	e and Address of	Current Regist	lered Agent		81	Alama		10. Name and	Address of No	w Registere	d Agent	
							Name	M	ark West	<u>t </u>			
-						82	Street /	Addres 27	s (P.O. Box Nun 60 S. Mi l.	nber is Not Acceptitary Tr	otable) crif		
						83			00 J. MI	iii y	417		
						<u> </u>	City			•		. 85 Z	Code
							- "	D	eerfield	Beach,	F		Code 442
or register	ad agent o	sions of Sections 60 or both, in the State	of Florida, Such	change was au	thorizeci t	the above-r by the corp	named co oration's	orporati board	ion submits this of directors. I he	statement for the reby accept the a	purpose of appointment	changing its r as registered	agistared office agent. I am
familiar wit	th, and acc	ept the obligations	phSection 607,0	0505, Florida Sti	atutes.					3-4			
SIGNATURE _	Signature, type	d or printed name of registe	, - ,			Registered Ager	vi algrature n	equired w	han reinstating)		DATE		
12.		OFFICE	RS AND DIREC			13.			ADDITIONS	ACHANGES TO			
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CITY-ST-ZIP Title				DELETI	<u> </u>	2. 1 TITLE						Change	Addition
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CITY-ST-ZIP Title	-			DELET		4.4 CITY-S 5 1 TITLE	51 - ZIP				•	Change	Addition
NAME						52 NAME			1 (00001	PAA		
STREET ADDRESS		•				5.3 STREET	ADDRESS		[3/15/96-	-01023-	006 006	
CITY-ST-ZIP						5.4 CITY-5	ST-ZNP		**	*1043_00	~ a ~ u u		
TITLE				☐ DELET	E	6. 1 TITLE		}		_		Change	Addition
NAME						5.2 NAME 5.3 STREET	Annecee					5-1	al
STREET ADORESS City+St-Zip						6.3 STREET						51	N
14 Leb barah	y certify the	at the information s	upplied with this	filing is voluntar	y furnish	ed and dos	s not aus	alify for	the exemption s	stated in Section	119.07(3)(k)	Florida Statu	les I further
oath: that	I am an off	ation indicated on t icer or director of the	ne comporation or	r the receiver or	trustee er	mpowered	lo execut	te this	report as require	nature shall nave id by Chapter 60	rune same le 7, Florida Sta	yai emect as i itutes; and th	et my name
appears in	n Block 12 i	or Block 13 if chang	ged, or on an att	achment with a	n accoress	i.			2.4	1-96	901-	12/VGC	90
SIGNAT	URE:	9	mark	-100a	とし	/. / /·			5	7" /10	134	ישטער איני	10