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

DOCUMENT # 1. Corporation Name

P94000029155 (6)

BUIRALIGH LTD INC

	ce of Business	Mailing Address						
11439 BOCA WOODS LN 11439 BOCA BOCA RATON FL 33428 BOCA RATOR								
					3. Date Incorporated or Qualified 04/14/1994	3a. Date 04	of Last /10/1	,
2. Principal Place of Business 2a. Mailing Address 21					4. FE! Number Applied For			T
								Not Applicable
Suite, Apt. #, etc. Suite, Apt. #. etc. 27				5. Certificate of Status Desired	\$8.75 Additional Fee Required			
Orty & State City & State					6. Election Campaign Financing			
23 28					Trust Fund Contribution	\$5.00 May Be Added to Fees		
Zip Country Zip		Ζφ	Country		8. This corporation has liability for in	ntangible tax		
24	9, Name and Address of Current Registered Agent		30		Florida Statutes 💢 Yes 🗌 No			
	a, Manie and Address of Curr	ent Hegistered Agent		T	10. Name and Address of New Ro	egistered A	gent	··
RI I IPA	MICH DI		81	Name				
BLUBAUGH, R L 11439 BOCA WOODS LN BOCA RATON FL 33428			82	Street Add	dress (P.O. Box Number is Not Acceptable)			
			83	ļ				·
			84	City		FL	85 2	ip Code
12.	Signative ingestor printed rights of register due to OFFICERS A	ND DIRECTORS	13.	Esignature respire	ADDITIONS/CHANGES TO OFFIC	(ATE	NOI CT	ODS IN 10
TIFLE	D DELETE		1 1 TIFLE		The state of the s		Change	·
NAME	BLUBAUGH, R L		1.2 NAM(•	
STREET ADDRESS	11439 BOCA WOODS LN		L3 STREET	ADORESS				
CITY+ST-ZIP TITLE	BOCA RATON FL 33428	- Descri	1.4 CITY - S	7-79				
NAME		DELETE	2.1 Ditt	1			Change	Addition
STREET ADDRESS			2.2 NAME	AE DECCOR				
CITY - ST - ZIP			2.3 STH281 2.4 CITY - S					
THILE		DELETE	3 1 TITLE	1 21			Change	Addition
NAME			3.2 NAME			L.J	Onlange	
STREET ADDRESS			3.3 STREET	ADDRESS				
CITY - ST - ZIF			3 4 CH1 - S	T - 21P				
TITLE		☐ DELETE	4 1 TOFLE				Change	☐ Addition
NAME STREET ADDRESS			4.2 NAME					
CITY-ST-ZIP			4.3 STALLT					
TITLE		DELEJE	44 C-TY - S 5 1 TiTeF	I ZIP			0.	
NAME		L'1 secese	5.2 NAME				Change	Addition
STREET ADDRESS			5 3 STARCE.	ADDRESS.				
CITY - ST - ZIP			5.4 QITY - \$1					
TITLE				- 712				
NAME		☐ OFLETE	6 1 TITLE	- ZIP			Channe	Addition
		☐ OFLETE		1-7IP			Change	Addition
STREET ADDRESS		DELETE	6 1 TITLE				Change	Addition

6 4 CITY-S1-ZIP

14. Ldo 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 amoust report is true and accurate and that my signature shall have the same legal effect as if made under appears in Block 12 or Block 13 if oranged, or on an attachment with an address

SIGNATURE:

SIGNATURE:

A C TRUE BANGING

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/18/96 40748-0316