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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT #

1. Corporation Name

SIGNATURE:

P94000039610 (8)

SANDRA SANDRA SANDRA

Suite, Apt. #, etc 22 SU/TE IOS City & State 23 PEMBROKE PINES, PL 28 PEMBROKE PINES, FL Trust Fund Contribution Status Desired Address of Country 24 3302 L 25 U/SA 29 3003 L 30 U/SA 8. This corporation has liability for intangible tax under selected Agent KAPLAN, SANDRA ***SOPRIBE PINES FL 30025-3004 L 30 U/SA 8. This corporation has liability for intangible tax under selected Agent KAPLAN, SANDRA ***SOPRIBE PINES FL 30025-3004 L 30 U/SA 8. This corporation has liability for intangible tax under selected Agent KAPLAN, SANDRA ***SOPRIBE PINES FL 30025-3004 L 30 U/SA 8. This corporation has liability for intangible tax under selected Agent ***SUITE 10S 9. Name and Address of Current Registered Agent ***SUITE 207- SUITE 10S 83	eport 395 Applied For Not Applicable Additional Aequired May Be I to Fees
### SO PALM CIRCLE WEST 1045 7 NW 8 ST SWITE 407 PEMBROKE PINES FL 93025— 2. Principal Place of Business 3. Date incorporated or Qualfed Od/18/18/18 3. Date inc	eport 395 Applied For Not Applicable Additional Aequired May Be I to Fees
28. Maling Address Suite, Apt. #, etc. Suite, Apt. #, etc. 27. Suite, Apt. #, etc. 28. JOYST NW 8 ST 65-0491129	Applied For Not Applicable Additional Required May Be I to Fees
21 /0457 NW 8 ST 26 /0457 NW 8 ST 65-0491129	Not Applicable Additional Required May Be I to Fees
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25 USA 29 33036 30 USA 8. This corporation has liability for intangible tax under s Florida Statutes	199.032.
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 11. Name KAPLAN, SANDRA 150 PALM CIRCLE WEST 10457 NW 8 ST SUITE 207 PEMBROKE PINES FL 39025 3 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	
KAPLAN, SANDRA **SO PALM CIRCLE WEST 10457 NW 8 ST SUITE 207 PEMBROKE PINES FL 39025- 3 3026 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its referror in registered 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 registered a SIGNATURE SIGNATURE Signature blad for prostroid a Statute days and for the provisions of Section 607.0505, Florida Statutes. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 14. THE DP DEFIE NAME KAPLAN, SANDRA	
SUITE 207 SUITE 105 PEMBROKE PINES FL 39025- 3 302 6 11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its refamiliar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE Signate fundament as the isonate of fundament as the familiar before the purpose of changing its refamiliar before the obligations of, Section 607.0505, Florida Statutes. SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR INC. DP DELETE 1: HILE NAME KAPLAN, SANDRA	
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12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR 1: TILLE DP	gistered office agent. I am
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4. I do hereby certify that the information supplied with this firing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes, oath; that I am an office or director of the corporation or the receiver or trustee empowered to execute this record as required by Chestre 63.2 Florida Statutes.	