CORPO ANNUA	ROFIT ORATION LL REPORT 996 5-	1.98	Sandra B Secretar	RIMENT OF STATE  3. Mortham  ry of State  CORPORATIONS			
OCUM Corporation N	IENT #	P940000	51903 (0)				
•	HN GALT CO	MPANY					
cipal Place of	f Business		Mailing Address			<b>80</b> 516 <b>8310</b> 1 <b>0</b> 3101 01	<b>810</b> 18111 1810 8 1411 1001
500 n militai Te 102 Oca Raton S			2500 N MILITARY TRAIL STE 102 BOCA RATON FL 33431 US		Date Incorporated or Qualified     07/13/1994	3a. Date of t	Last Report 5/1995
Principa! Plac	e of Business	F-	2a. Mailing Address		4. FEI Number 65-0504932	1	Applied For Not Applicable
Suite, Apt. #,	etc.	2	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$	8.75 Additional
Dity & State	ANT THE	2	City & State		Election Campaign Financing     Trust Fund Contribution		\$5.00 May Be Added to Fees
<u></u>	<b>⊢</b> -1	untry	Zip	Country	8. This corporation has liability for i	intangible tax ur	nder s. 199.032,
	g, Name and A	2 ddress of Current Re		81 Name	10. Name and Address of New R	legistered Age	ont
BOCA RA	AMES D RTH MILITARY ATON FL 33431	XV	6N7 150s Florida Statute	83   84 City	dress (P.O. Box Number is Not Acceptable)  oration submits this statement for the pure	FL 8	35 Zip Code
Pursuant to or registered familiar with	RTH MILITARY ATON FL 33431 the provisions of d agent, or both, n, and accept the	Section 607 050 and of the state of floring the state of floring the state of secution of	0 X0505, Fibrida Statutes	83  84 City  Sh, the above named curporal by the corporation's box	oration submits this statement for the pul ard of directors. I hereby accept the app	FL Frose of changi cointment as rec	ng its registered office
Pursuant to or registered familiar with	RTH MILITARY ATON FL 33431 of the provisions of d agent, or both, n, and accept the agenture, typed or printer	Sections 607, 050% and	not change yeas authorize 0 No505, Fibrida Statutes to it applicable (NO RECTORS	83  84 City  Ph., the above named curpored by the corporation's positive Registered Agent signature requirements.  13.	oration submits this statement for the pul ard of directors. I hereby accept the app	FL From the state of the state	ng its registered offici pistered agent. I am RECTORS IN 12
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