## FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

**PROFIT** CORPORATION



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

ANNUAL REPORT Secretary of State  1996 DIVISION OF CORPORATIONS									
DOCUM 1. Corporation I	1ENT # P94000	056339 (2	2)						
,	INVESTMENTS, INC.								
Principal Place of Business Mailing Address							<b>45</b> 111 <b>6111 6</b> 111	# 11111 IIIU	HUU <b>U 19</b> 14 1 <b>95</b> 1
3564 SOUTH I LAKE WORTH	MILITARY TRAIL FL 33463	3564 SOUTH MILITARY TRAIL LAKE WORTH FL 33463			Date Incorporated or Qualified				
						07/29/1994	<u> </u>	/10/199	Sapplied For
2. Principal Place	ce of Business	2a. Mailing Address 26				APPLIED FOR 65	05206	08 N	lot Applicable
Suite, Apt. #	, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional Required
City & State		City & State				Election Campaign Financing     Trust Fund Contribution			May Be d to Fees
<b>23</b>	Country	Ζιρ		intry		8. This corporation has liability for Florida Statutes	intangible ta	x under s	199.032,
24	25   9. Name and Address of Current	29 Registered Agent	30	Τ		10. Name and Address of New F		Agent	
				81	Name				
VOGEL, HOWARD I			82	Street Add	lress (P.O. Box Number is Not Acceptal	ole)			
3564 SOUTH MILITARY TRAIL LAKE WORTH FL 33463				83					
DAKE WOMMY E GOTOO					City			<b>85</b> Zg	o Code
					l	notion or knote this statement for the or	FL	anging its r	egistered office
11. Pursuant to or registere	o the provisions of Sections 607.0502 ad agent, or both, in the State of Floric	and 607,1508, Florida Stati ia: Such change was author	ites, the ab ized by the	corp	named corpo noration's boa	oration submits this statement for the pu and of directors. I hereby accept the app	ointmerit as	registered	agent. Lam .
SIGNATURE	n, and accept the obligations or, Section								
12.	Signature, typed or printed name of registrace agent.  OFFICERS AND		u(i) E. Registere 13.		ot signal na réque	ADDITIONS/CHANGES TO OF	DATE FICERS AND	DIRECTO	DRS IN 12
TITLE	D	DELETE	1.1	TITLE			1	Cnange	☐ Addition
NAME	VOGEL, HOWARD I		1.21	NAME					
STREET ADDRESS	3564 SOUTH MILITARY TRAIL	-	1,3	STREE	T ADDRESS				
CITY-ST-7IP	LAKE WORTH FL 33463				S1 - 20P			Change	☐ Addition
TITLE	D	☐ DELETE		TETLE			ı	Change	[ Addition
NAME	VOGEL, LEE S			NAME					
STREET ADDRESS	3564 SOUTH MILITARY TRAIL	-	1		I ACORESS				
CrTY - ST - ZIP	LAKE WORTH FL 33463	DELETE		TITLE	ST-ZIP			Change	Addition
11/11				NAME					
NAME OTOGET ADDRESS					EL ADDRESS				
STREET ADDRESS CITY - ST - ZIP			- 6		\$1-719				
TrILE		☐ DELETE	4 1	THE				☐ Change	Addit.on
NAME			42	NAME	•				
STREET ADDRESS			4 3	STREE	ET ADDRESS				
CITY - ST - ZIP					S1 - ZIP			Change	Addition
TITLE		☐ DELETE		TITLE					
NAME				NAME	ET ADDRESS				
STREET ADDRESS					-ST-ZIP				
CITY - S1 - ZIP		DELETE		HILL				☐ Change	Addition
NAME		<u></u>		NAME					
STREET ADDRESS				_	ET ALORESS				

64 CITY-SI-7/IP

g is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes. I further supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under creceiver extrustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name unent with an address. 14. I do hereby certify that the information supplied with this filling certify that the information indicated on this annual report of cath; that I am an officer or director of the corporation or the appears in Block 12 or Block 13 if changed, or on an attack.

CITY - ST - ZIP

SIGNATURE AND TYPED ON PRINTED NAME OF SIGNING OFFICER OR DIRECTOR VOGEL PRES.

4/0/94 (402)945-5788

CR2E034 (12/95)