ANNUA	ROFIT ORATION AL REPORT 996			ORIDA DEPAR Sandra B Secretar NVISION OF C	3. Morthan ry of State	n 9				
DCUN Corporation N R. K. P.,	Name	940000)6631	6 (8)						
cipa! Place o	of Business		Mailing Add	iress				8810) 88118 81139 .	11100 1110 1 11	1919 <u>6</u> (1) (69)
	GHWAY SUITE 320 FL 33432-6021			ie highway s Ion fl 334324						
							 Date incorporated or Qualified 09/06/1994 	3a. Date o	of Last Rep 01/1995	
Principal Plac	ce of Business		2a. Mailing	Address			4. FEI Number 65-0530133		A	pplied For ot Applicable
Suite, Apt. #,	, etc.			.pt. #, etc.		· · · · · · · · · · · · · · · · · · ·	 Certificate of Status Desired 		\$8.75	Additional equired
Dity & State			27 City & S	State			6. Election Campaign Financing		\$5.00	May Be
Zip	Coun		28 Zip		Cou	intry	Trust Fund Contribution	intangible tax		to Fees 199.032,
	25 9. Name and Add		29		30	I	Florida Statutes Yes 10. Name and Address of New F	s No Registered A	gent	
400 S DIX	dt, richard a Ge highway suit Ton FL 33432-603					83	Iress (P.O. Box Number is Not Acceptal	ble)	95 7m	Code
400 S DIX BOCA RA	ge highway sun Ton Fl 33432-60	21 ctions 607.0502 an	Such change	i was alunonze	еа ру гле і	83 84 City	ress (P.O. Box Number is Not Acceptal pration submits this statement for the pu and of directors. Thereby accept the app	FL.		Code egistered offic agent. I am
400 S DIX BOCA RA	GE HIGHWAY SUIT TON FL 33432-602	21 ctions 607.0502 ar he State of Florida. gations of, Section	607.0505, Fk	orida Statutes.	ea by the l	83 84 City	oration submits this statement for the pu and of directors. I hereby accept the app	FL urpose of char pointment as r	nçing its re registered	egistered offic agent. I am RS IN 12
400 S DIX BOCA RA Pursuant to or registere familiar with NATURE	D TON FL 33432-600 b the provisions of Sec a agent, or both, in th h, and accept the obli Signature typed or printed ner D	21 ctions 607.0502 an ne State of Florida. gations of, Section ne of registered agent and OFFICERS AND E	Such change 607.0505, Fix	orida Statutes.	TE: Registered 13.	83 84 City over named corpo corporation's box o Agent signature reade	pration submits this statement for the pu and of directors. I hereby accept the app ad when relistating:	FL Irpose of chair Dointment as r DATE FICERS AND	nçing its re registered	agistered offic agent. I am
400 S DIX BOCA RA	DE HIGHWAY SUIT TON FL 33432-602 to the provisions of See ad agent, or both, in th h, and accept the obli Signature traced or protect new	21 ctions 607.0502 an ne State of Florida. gations of, Section ne of registered agent and OFFICERS AND E CHARD A	607.0505, Fix title if applicable DIRECTORS	orida Statutes.	TE: Registerer 13. 1.2 N	83 84 City ove-named corpo corporation's boo	pration submits this statement for the pu and of directors. I hereby accept the app ad when relistating:	FL Irpose of chair Dointment as r DATE FICERS AND	nging its re registered	egistered offic agent. I am RS IN 12
400 S DIX BOCA RA Pursuant to or registere familiar with NATURE E E EELADDRESS -S1-ZIP	D GE HIGHWAY SUIT TON FL 33432-602 D the provisions of Sec agent, or both, in th h, and accept the oblic Substature broad or printed new D GESCHEIDT, RKC 400 S DIXIE HIG BOCA RATON F	21 ctions 607, 0502 an he State of Florida. gations of, Section ne of registered agrint and OFFICERS AND E CHARD A HWAY SUITE 32	Such change 607.0505, Fik DIRECTORS	DELETE	TE: Registered 13. 1 11 1.2 N 1.3 S 1.4 C	83 84 City over named corporation's box o Agent signature reads	pration submits this statement for the pu and of directors. I hereby accept the app ad when relistating:	FL Irpose of char Dointment as r DATE FICERS AND	nging its re registered	egistered offic agent. I am RS IN 12
400 S DIX BOCA RA	D GE HIGHWAY SUIT TON FL 33432-60 b the provisions of Se agent, or both, in th and accept the oblic signature broad or preted as D GESCHEIDT, RK 400 S DIXIE HIG	21 ctions 607.0502 ar he State of Florida. gations of, Section The of registered agent and OFFICERS AND E CHARD A HWAY SUITE 32 L 33432-6021	Such change 607.0505, Fik DIRECTORS	orida Statutes.	TE: Registered 13. 1 11 1.2 N 1.3 S 1.4 C 2.1 2.2 N	83 84 City over named corporation's box o Agent signature reader TITLF IAME STREET ADDRESS CITY - ST - ZIP	pration submits this statement for the pu and of directors. I hereby accept the app ad when relistating:	FL Irpose of char Dointment as r DATE FICERS AND	DIRECTOR Change	agistered offic agent. I am RS IN 12
400 S DIX BOCA RA Pursuant to or registere familiar with SNATURE	D D D D D D D D D D C C C C C C C C C C C C C	21 ctions 607.0502 ar he State of Florida. gations of, Section The of registered agent and OFFICERS AND E CHARD A HWAY SUITE 32 L 33432-6021 LY RIVER RD. #112	607.0505, Fil 1090 if aryticarie DIRECTORS 20	DELETE	TE: Registered 13. 111 12N 13S 14C 2.1 221 23S 24C	83 84 City oxe-named corporation's box o Agent signature react TITLF IAME STREET ADDRESS DITY-ST-ZIP TITLE VAME	pration submits this statement for the pu and of directors. I hereby accept the app ad when relistating:	FL irpose of char contment as r DATE FICERS AND	DIRECTOR Change	agistered offic agent. I am RS IN 12
400 S DIX BOCA RA Pursuant to or registere familiar with SNATURE	D GESCHEIDT, RK 400 S DIXIE HIG BOCA RATON F P MCMAHON, KEL 1035 SPANISH I BOCA RATON F V MCMAHON, RO 1035 SPANISH	21 ctions 607.0502 ar he State of Florida. gations of, Section The of registered agent and OFFICERS AND E CHARD A HWAY SUITE 32 L 33432-6021 LY RIVER RD. #112 BERT M. RIVER RD. #112	Such change 607.0505, Fik DIRECTORS 20	(NO)	TE: Registered 13. 1 11 12N 1.3S 1.4C 2.1 22N 23S 24C 3.1 32N	83 84 City oxe-named corporation's box o Agent signature reader TITLF IAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP	pration submits this statement for the pu and of directors. I hereby accept the app ad when relistating:	FL irpose of char contment as r DATE FICERS AND	DIRECTOR Change	agistered offic agent. I am RS IN 12 Addition
400 S DIX BOCA RA Pursuant to or registere familiar with SNATURE	D GE HIGHWAY SUIT TON FL 33432-602 D the provisions of Se ad agent, or both, in th and accept the oblic Strature freed or preted new D GESCHEIDT, RK 400 S DIXIE HIG BOCA RATON F P MCMAHON, KEL 1035 SPANISH I BOCA RATON F V MCMAHON, ROI	21 ctions 607.0502 ar he State of Florida. gations of, Section The of registered agent and OFFICERS AND E CHARD A HWAY SUITE 32 L 33432-6021 LY RIVER RD. #112 BERT M. RIVER RD. #112	Such change 607.0505, Fil DIRECTORS 20 20	(NO)	TE Registered 13. 1 11 12N 13S 14C 2 1 22N 23S 24C 3 1 32P 33. 34L	83 84 City oxe-named corporation's box o Agent signature requirements TITLE IAME STREET ADDRESS CITY - ST - ZIP TITLE VAME STREET ADDRESS CITY - ST - ZIP TITLE VAME STREET ADDRESS CITY - ST - ZIP TITLE VAME	pration submits this statement for the pu and of directors. I hereby accept the app ad when relistating:	FL urpose of char pare FICERS AND	DIRECTOR Change	agistered offic agent. I am RS IN 12 Addition
400 S DIX BOCA RA Pursuant to or registere familiar with SNATURE - S F F F F F F F F F F F F F F F F F F	D GESCHEIDT, RK 400 S DIXIE HIG BOCA RATON F P MCMAHON, KEL 1035 SPANISH I BOCA RATON F V MCMAHON, RO 1035 SPANISH	21 ctions 607.0502 ar he State of Florida. gations of, Section The of registered agent and OFFICERS AND E CHARD A HWAY SUITE 32 L 33432-6021 LY RIVER RD. #112 BERT M. RIVER RD. #112	Such change 607.0505, Fil DIRECTORS 20 20) DELETE	TE Registered 13. 1 11 1 2N 1.3S 1.4 (C 2.1 2.2 2.4 (C 3.1 3.2 3.3 3.4 4.1 4.1 4.2	83 84 City Dve-named corporation's box corporation's box o Agent signature reade TITLE IAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME	pration submits this statement for the pu and of directors. I hereby accept the app ad when relistating:	FL urpose of char pare FICERS AND	DIRECTOR Change	agistered offic agent. 1 am RS IN 12 Addition
400 S DIX BOCA RA Pursuant to or registere familiar with NATURE	D GESCHEIDT, RK 400 S DIXIE HIG BOCA RATON F P MCMAHON, KEL 1035 SPANISH I BOCA RATON F V MCMAHON, RO 1035 SPANISH	21 ctions 607.0502 ar he State of Florida. gations of, Section The of registered agent and OFFICERS AND E CHARD A HWAY SUITE 32 L 33432-6021 LY RIVER RD. #112 BERT M. RIVER RD. #112	Such change 607.0505, Fil DIRECTORS 20 20) DELETE	TE Registered 13. 1 11 1 2N 1 3S 14C 2 1 2 2N 2 3S 2 4C 3 1 3 2N 3 3. 3 41 4 1 4 22 4 33 3 41 4 1 4 22 4 33 3 41 4 1 4 22 4 33 4 33 4 4 4 4 4 4 4 4 4 4 4	83 84 City Dive-mamed corporation's box corporation's box o Agent signature reader TITLE VAME STREET ADDRESS CITY - ST - ZIP TITLE VAME STREET ADDRESS CITY - ST - ZIP TITLE VAME STREET ADDRESS CITY - ST - ZIP TITLE VAME STREET ADDRESS CITY - ST - ZIP TITLE VAME STREET ADDRESS CITY - ST - ZIP TITLE VAME STREET ADDRESS CITY - ST - ZIP TITLE	pration submits this statement for the pu and of directors. I hereby accept the app ad when relistating:	FL Irpose of char pointment as r DATE FICERS AND	Inging its re- egistered	agent. 1 am RS IN 12 Addition Addition
400 S DIX BOCA RA Pursuant to or registere familiar with INATURE	D GESCHEIDT, RK 400 S DIXIE HIG BOCA RATON F P MCMAHON, KEL 1035 SPANISH I BOCA RATON F V MCMAHON, RO 1035 SPANISH	21 ctions 607.0502 ar he State of Florida. gations of, Section The of registered agent and OFFICERS AND E CHARD A HWAY SUITE 32 L 33432-6021 LY RIVER RD. #112 BERT M. RIVER RD. #112	Such change 607.0505, Fil DIRECTORS 20 20) DELETE	Bot by the 1E. Registered 13. 1 11 12N 1.3S 1.4C 2.1 2.21 2.2 2.3 2.4 3.1 3.3 3.41 4.1 4.2 4.3 4.4 5.1	83 84 City Dve-named corporation's box corporation's box o Agent signature reade TITLE IAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	pration submits this statement for the pu and of directors. I hereby accept the app ad when relistating:	FL Irpose of char pointment as r DATE FICERS AND	DIRECTOR Change	agistered offic agent. 1 am RS IN 12 Addition
400 S DIX BOCA RA Pursuant to or registere familiar with INATURE	D GESCHEIDT, RK 400 S DIXIE HIG BOCA RATON F P MCMAHON, KEL 1035 SPANISH I BOCA RATON F V MCMAHON, RO 1035 SPANISH	21 ctions 607.0502 ar he State of Florida. gations of, Section The of registered agent and OFFICERS AND E CHARD A HWAY SUITE 32 L 33432-6021 LY RIVER RD. #112 BERT M. RIVER RD. #112	Such change 607.0505, Fil DIRECTORS 20 20) DELETE	BC by the 1E. Registered 13. 1 11 12N 1.3S 1.4C 2.1' 3.1 3.1 3.1 3.1 4.1 4.1 5.1 5.2' 5.3	83 84 City oxe-named corporation's box corporation's box o Agent signature react TITLE IAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE VAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	pration submits this statement for the pu and of directors. I hereby accept the app ad when relistating:	FL Irpose of char pointment as r DATE FICERS AND	Inging its re- egistered	agent. 1 am RS IN 12 Addition Addition
400 S DIX BOCA RA BOCA RA BOCA RA SNATURE SNATURE E F F F E E E E E E E E E E E E E E E	D GESCHEIDT, RK 400 S DIXIE HIG BOCA RATON F P MCMAHON, KEL 1035 SPANISH I BOCA RATON F V MCMAHON, RO 1035 SPANISH	21 ctions 607.0502 ar he State of Florida. gations of, Section The of registered agent and OFFICERS AND E CHARD A HWAY SUITE 32 L 33432-6021 LY RIVER RD. #112 BERT M. RIVER RD. #112	Such change 607.0505, File DIRECTORS 20 20) DELETE	TE Registered 13. 1 11 1 2N 1 3S 1 4C 2 1 2 2H 2 3S 2 4C 3 1 3 2H 3 3. 3 4H 4 1 4 2H 4 3 3 4H 4 1 5 1 5 2 5 3 5 4	83 84 City Dve-named corporation's box corporation's box o Agent signature reader title table table	pration submits this statement for the pu and of directors. I hereby accept the app ad when relistating:	FL Irpose of char pointment as r FICERS AND	Inging its re- egistered	agent. 1 am RS IN 12 Addition Addition
400 S DIX BOCA RA	D GESCHEIDT, RK 400 S DIXIE HIG BOCA RATON F P MCMAHON, KEL 1035 SPANISH I BOCA RATON F V MCMAHON, RO 1035 SPANISH	21 ctions 607.0502 ar he State of Florida. gations of, Section The of registered agent and OFFICERS AND E CHARD A HWAY SUITE 32 L 33432-6021 LY RIVER RD. #112 BERT M. RIVER RD. #112	Such change 607.0505, File DIRECTORS 20 20	<pre>vaa autorize orida Statutes. (NO) DELETE) DELETE) DELETE) DELETE] DELETE</pre>	BC Dy (ne) 1E. Registered 13. 1 11 12N 13S 14C 2.1' 22S 24C 31 32P 33. 341 421 51 52 53 54 61 62	83 84 City Dve-named corporation's box corporation's box o Agent signature reader title table title table title street ADDRESS Dity-ST-ZIP title vame street ADDRESS City-ST-ZIP title NAME Street ADDRESS City-S1-ZIP	pration submits this statement for the pu and of directors. I hereby accept the app ad when relistating:	FL Irpose of char pointment as r FICERS AND	Grange Change Change Change Change	agent. 1 am RS IN 12 Addition Addition Addition Addition