5. Certificate of Status Desired \$8.75 Additional Fee Required  City & State City &	0.0	PROFIT		DISSOLVED, MININ	FLORIDA DEF	PARTMENT	OF STATE	í		
1996 DOUGHENT # P94000070254 (5)  THE REVAN GROUP, INC.  THE REVAN GROUP, INC.  Principal Place of furtheries  Mailing Address  1200 SW. 61 AME  1200 SW. 61 AM					Sandr	ra B. Mortha	am			
DOCUMENT # P94000070254 (5)  THE REYAN GROUP, INC.  Principal Place of Businets  Incorporation terms  Incorporation terms  Incorporation to Passe the State of Businets  Incorporation to Place of Businets  Incorporation to Place of Businets  Incorporation to Place the State of Businets  Incorporati		_							-11 LD	
THE REVAN GROUP, INC.  THE REVAN GROUP STATE  THE REVAN GROUP Class TREPOT  THE REVAN GROUP Class TREPOT  THE REVAN GROUP  THE	DOCL	JMENT #	# POAC	**************************************	<del></del>		Anone			
Principal Place of Business  1200 S.W. 61 AVE MAMIN PLASTS  1200 S.W. 61 AVE MAMIN PLASTS  2. Mailling Address  2. Mailling Address  3. Date incorporated or Qualified   3e. Date of Last Report  05/22/1994   96/22/1994   96/22/1994  2. Principal Place of Business  2. Mailling Address  3. Date incorporated or Qualified   3e. Date of Last Report  05/22/1994   96/22/1994   96/22/1994   96/22/1994  2. Principal Place of Business  3. Selts Apt #, etc.   97/24/1994   96/22/19	1. Corporati	tion Name	1 340	1000702	254 (5	<b>i)</b>		96 NOV	26 PH 1:	22
Principal Pace of Business  1200 S.W. 61 AVE  MAMP FL 20156  1200								SECRET	ARY OF ST	ΔTF
1200 S.W. 61 AVE MANI FL 23156  12 Principal Place of Business  12 Mining Address  13 Sub. April 4, etc.  2 Principal Place of Business  14 Sub. April 4, etc.  2 Sub. April 4, etc.  3 Sub. April 4, etc.  3 Sub. April 4, etc.  3 Sub. April 4, etc.  4 Sub. April 4, etc.  5 Sub. April 4, etc.  6 Exection Campaign Financing Address of Current Registered Agent  1 Sub. April 4, etc.  1 Sub. April 4, etc.  1 Sub. April 4, etc.  2 Sub. April 4, etc.  2 Sub. April 4, etc.  3 Sub. April 4, etc.  5 Sub. April 4, etc.  5 Sub. April 4, etc.  5 Sub. April 4, etc.  6 Exection Campaign Financing Address of Current Registered Agent  1 Sub. April 4, etc.  2 Sub. April 4	<u>-</u> -							I TAPAH MANA	MATE IN HA	<b>SANDARA DONO NODI BUDI BIAN IRA</b>
3. Date Incorporated or Qualified 3. Dat			₹ - 4);	Mailing A	\ddress			1 LEONIDO SPE HOR	PHAN BANN BANK BANK	<b>90</b> 00 1000 0010 1100 0100 0100 000
2. Malling Address   2. Malling Address   3. Certificate of Business   4. FEI Number   55.0525844   5. Certificate of Status Desired   5. Certificate of Sta	12900 S.W. Miami Fl 3:	61 AVE 13156								
Suries, Apt. #, etc.    29			<b>-</b>				İ	3. Date Incorporated	or Qualified	
Suite, Apri #, etc.    Suite	_	Place of Business	s		g Address		_	4. FEI Number	<del>  </del>	
S. Certificate of Status Desired	Suite, Apt.	ı. #, etc.	<del></del>	<del></del>	Apt. #, etc.			65-0525644		Not Applicable
Second Company Financing		10		27				5. Certificate of Statu	s Desired	\$8.75 Additional
2p   Country   Zip   Country   Sip   So   Sip   Sip   So   Sip   S	3	(e		<u>⊢</u> ¬ '	State			6. Election Campaign	Financing F	\$5.00 May Be
9. Name and Address of Current Registered Agent		25	Country	Zip		<del></del>	itry	Trust Fund Contribu	ution L	Added to Fees
ORAND RESECCAT  #221-BROKELL AVE.  #### FL 69181-  11. Pursuant to the provisions of Sections 607 0502 and 607 1506, Provide Statutes, the above hard of provisions ubmiles this statement for the purpose of changing its registered agent, or both, in the State of Florids. Such change when an advantage or registered agent, or both, in the State of Florids. Such change when an advantage or registered agent, or both, in the State of Florids. Such change when an advantage or registered agent, or both, in the State of Florids. Such change when an advantage or registered agent, or both, in the State of Florids. Such change when an advantage or registered agent, or both, in the State or Florids. Such change when an advantage or registered agent, or both, in the State or Florids. Such change when an advantage or registered agent, or both, in the State or Florids. Such change when an advantage or registered agent, or both, in the State or Florids. Such change when an advantage or registered agent, or both, in the State or Florids. Such change is registered or registered agent, or both, in the State or Florids. Such change is registered and registered agent.  ##### Cappa	TENER OF THE PERSON OF THE PER		d Address of Curr	29] ent Registered A	gent :	30	<del>-   ·</del>	Fiorida Statutes	I I Y	′es No
Street Address (P.O. Box Number is Not Acceptable)  12-900 Fix Of NARAGE  11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Horida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointing as seguitated special part of the market with and accept the purposition of Section 50.00. Florida Statutes are submits this statement for the purpose of changing its registered special part of market part of directors. I hereby accept the appointing its registered special part of the purpose of changing its registered special part of the purpose of changing its registered special part of the purpose of changing its registered special part of the purpose of changing its registered special part of the purpose of changing its registered special part of the purpose of changing its registered special part of the purpose of changing its registered special part of the purpose of changing its registered special part of the purpose of changing its registered special part of the purpose of changing its registered special part of the purpose of changing its registered special part of the purpose of changing its registered special part of the purpose of changing its registered special part of the purpose of changing its registered special part of the purpose of changing its registered special part of the purpose of changing its registered special part of the purpose of changing its registered part of the purpose of the purpose of changing its registered part of the purpose of the purpo		RAND, REBECO	<del>CA-N-</del>		<del></del>	8	Name N	10. Name and Audres		ered Agent
1. Pursuant to the provisions of Socilons 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florida Such change was authority and corporation submits this statement for the purpose of changing its registered signal. I am familier with, and accept the paragrators of Society of Society 100.0505, Florida Statutes. The appropriate approximation as registered signal. I am familier with, and accept the paragrators of Society 100.0505, Florida Statutes. The purpose of changing its registered signal in the paragrators of Society 100.0505, Florida Statutes. The purpose of changing its registered signal in the purpose of changing its registered signal in the purpose of changing its registered signal. The purpose of changing its registered signal in the purpose of changing its registered signal. The purpose of changing its registered signal in the purpose of changing its registered signal. The purpose of changing its registered signal in the purpose of changing its registered signal. The purpose of changing its registered signal in the purpose of changing its registered signal. The purpose of changing its registered signal in the purpose of changing its registered signal in the purpose of changing its registered signal. The purpose of changing its registered signal in the purpose	· 42	EL ANDELL	AVE-			8	Street Ad	ddress (P.O. Box Number is N	lot Acceptable)	
1. Pursuant to the provisions of Socilons 607.0502 and 607.1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the purpose of changing its registered agent. I am familiar with, and accept the purpose of changing its registered agent. I am familiar with, and accept the purpose of changing its registered agent. I am familiar with, and accept the purpose of changing its registered agent. I am familiar with, and accept the purpose of changing its registered agent. I am familiar with, and accept the purpose of changing its registered agent. I am familiar with, and accept the purpose of changing its registered spent and time a speciations. I accept the purpose of changing its registered agent and accept the purpose of changing its registered agent. I am familiar with, and accept the purpose of changing its registered agent. I am familiar with, and accept the purpose of changing its registered agent. I am familiar with, and accept the purpose of changing its registered agent. I am familiar with, and accept the purpose of changing its registered agent. I am familiar with, and accept the purpose of changing its registered agent. I am familiar with, and accept the purpose of changing its registered agent. I am familiar with, and accept the purpose of changing its registered agent. I am familiar with, and accept the purpose of changing its registered agent. I am familiar with, and accept the purpose of changing its registered agent. I am familiar with, and accept the purpose of changing its registered agent accept the purpose of changing its registered agent accept the purpose of changing its registered agent. Late the purpose of changing its registered agent accept the purpose of changing its registered acceptance and acceptance acceptance acceptance acceptance acce	्रि∌ी संग्रह	Wil Frobiot				8	(2.9	100 SW GI AVE	NUE.	· · · · · · · · · · · · · · · · · · ·
1. Distribution 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 registered office or registered agent, or both, in the State of Florida. Such change was authorized by the porporation's board of directors. I herably accept the perpose of changing its registered signed and accept the operations of Section 120 per 120						1	<b>~</b>			<del></del>
Signature in the State of Findida. Such change was authorized by the porporation's board of directors. I hereby accept the appointment as registered sperit. I milling milling and accept the appointment as registered statutes.    International content of the purpose of changing list registered sperit and milling milling and accept the appointment as registered statutes.    International content of the purpose of changing list registered statutes.   International content of the purpose of changing list registered statutes.   International content of the purpose of changing list registered statutes.   International content of the purpose of changing list registered statutes.   International content of the purpose of changing list registered statutes.   International content of the purpose of changing list registered statutes.   International content of the purpose of changing list registered statutes.   International content of the purpose of changing list registered statutes.   International content of the purpose of changing list registered statutes.   International content of the purpose of changing list registered statutes.   International content of the purpose of changing list registered statutes.   International content of the purpose of changing list registered statutes.   International content of the purpose of changing list registered statutes.   International content of the purpose of changing list registered statutes.   International content of the purpose of changing list registered statutes.   International content of the purpose of changing list registered statutes.   International content of the purpose of changing list registered statutes.   International content of content of the purpose of changing list registered statutes.   International content of content			·			<u>a</u>	<del></del>			
SIGNATURE    Signature, typed or primited agreed agreed and line if applicables.   INOTE Registered agreed when relevanted whe	Pursuant to	o the provisions	of Sections 607,05	20 207 1500			" M	IAMI	· · · · · · · · · · · · · · · · · · ·	El 85 Zip Code
OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  AME  GILMAN, MILES E  12000 S.W. 61 AVE.  MIAMI FL 33156  DELETE  DELETE  DELETE  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  LOWER LOWERS  12 NAME  12 NAME  13 STREET ADDRESS  14 CDY-ST-2IP  LE  ME  ME  DELETE	Pursuant to office or reagent. I an	to the provisions egistered agent, in familiar with, a	of Sections 607.05 or both, in the State and accept the oblig	i02 and 607.1508, e of Florida. Such	Florida Statute change was a		" M	rporation submits this statemation's board of directors. I he	ent for the purpor	FL 85 Zip Code 33/5 C
DELETE   DELETE   1.1111LE     Change   Addition   Addition   Street Address   Addition   Addition   Street Address   Addition   A	IGNATURE	•		gallons 12 Goc lon	009.0505, FIO	es, the above authorized by orida Statute	ve-named cor by the corpora	rporation submits this statem ation's board of directors. I he	ent for the purpore	FL 85 Zip Code 33/52 se of changing its registered appointment as registered
GULAN, MILES E 12800 S.W. 61 AVE.  ILE MARE ILE	IGNATURE 2.	Signature, typed or prin	nted name a registered ag	gent and little if applicable	009.0505, FIO	es, the above authorized by orida Statute:	ve-named cor by the corpora	rporation submits this statem ation's board of directors. I he pured when reinstating)	D. O.	se of changing its registered appointment as registered
INY-ST-ZIP MIAMI FL 33156  ILE  ILE  ILE  ILE  INFERT ADDRESS  ILE  ILE  INFERT ADDRESS  INFER	IGNATURE E	Signature, typed or prin	officers and	gent and little if applicable	. (NOTI	es, the above authorized by prida Statute:  [E: Registered Agents and the statute are statuted by the statuted	ve-named cor yy the corpora ss.	rporation submits this statem ation's board of directors. I he pured when reinstating)	D. O.	se of changing its registered appointment as registered  #
DELETE   DELETE   Addition   Change   Change   Addition   Change   Change   Change   Change   Change   Cha	IGNATURE 2. TLE IME	D GILMAN, MI	OFFICERS AN	gent and little if applicable	. (NOTI	es, the above authorized by prida Statute:  E: Registered Ag  13.  1.1 TITLE  1.2 NAME	ve-named cor yy the corpora es.	rporation submits this statem ation's board of directors. I he pured when reinstating)	D. O.	se of changing its registered appointment as registered  //
The fact address rest address 2 NAME 2 STREET ADDRESS 2 Addition REET ADDRESS 3 A CITY-ST-ZIP RETAIL REET ADDRESS 4 Addition REET ADDRESS 4 CITY-ST-ZIP REET ADDRESS 5 CITURE CHange Addition REET ADDRESS 5 CITURE CHANGE ADDRESS 6 CITY-ST-ZIP CHANGE CHANGE ADDRESS 6 CITY-ST-ZIP CHANGE CHANGE ADDRESS 6 CITY-ST-ZIP CHANGE CH	IGNATURE  2.  ILE  ME  REET ADDRESS  Y-ST-ZIP	D GILMAN, MI 12900 S.W.	OFFICERS AN  ILES E  61 AVE.	gent and little if applicable	. (NOTI	es, the above authorized by prida Statute:  (E: Registered Ag  13.  1.1 TITLE  1.2 NAME  1.3 STREET	ve-named cor yy the corpora gent signature requ	rporation submits this statem ation's board of directors. I he pured when reinstating)	D. O.	se of changing its registered appointment as registered  #
DELETE 2.4.CITY-ST-ZIP	IGNATURE  2. ILE IME REET ADDRESS IY-ST-ZIP LE	D GILMAN, MI 12900 S.W.	OFFICERS AN  LES E 61 AVE.	gent and little if applicable	DELETE	es, the above authorized by prida Statute:  E: Registered Ag  13.  1.1 TITLE  1.2 NAME  1.3 STREET  1.4 CITY - ST	ve-named corry the corporal sis.  gent signature requirements for the corporal sis.  ET ADDRESS SI-ZIP	rporation submits this statem ation's board of directors. I he pured when reinstating)	D. O.	se of changing its registered appointment as registered  ### ### ############################
DELETE 2.4.CITY-ST-ZIP	IGNATURE  2. TLE  ME REET ADDRESS 1Y-ST-ZIP  LE  ME	D GILMAN, MI 12900 S.W.	OFFICERS AN  LES E 61 AVE.	gent and little if applicable	DELETE	es, the above authorized by prida Statute:  (E: Registered Ag  13.  1.1 TITLE  1.2 NAME  1.3 STREE:  1.4 CITY-5  2.1 TITLE	ve-named corry the corporals.  gent signature requirements.  ET ADDRESS ST-ZIP	rporation submits this statem ation's board of directors. I he pured when reinstating)  ADDITIONS/CHANGE	0 ES TO OFFICERS	se of changing its registered appointment as registered  ### ### ############################
ME	IGNATURE  2.  ILE  IME  RRET ADDRESS  Y-ST-ZIP  LE  ME  REET ADDRESS	D GILMAN, MI 12900 S.W.	OFFICERS AN  LES E 61 AVE.	gent and little if applicable	DELETE	es, the above valuthorized by prida Statute:  (E: Registered Ag  13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-5 2.1 TITLE 2.2 NAME 2.3 STREET	ve-named corry the corporal signature requirements.	rporation submits this statemation's board of directors. I he with the province of the provinc	0 S TO OFFICERS 1002101	se of changing its registered appointment as registered  //-۱/
Addition    DELETE   ADDRESS   3.3 STREET ADDRESS   3.4 CiTY-ST-ZIP	IGNATURE  2. ILE IME REET ADDRESS IY-ST-ZIP LE IME REET ADDRESS Y-ST-ZIP LE IME REET ADDRESS Y-ST-ZIP	D GILMAN, MI 12900 S.W.	OFFICERS AN  LES E 61 AVE.	gent and little if applicable	DELETE  DELETE	es, the above authorized by prida Statute:  (E: Registered Ag  13.  1.1 TITLE  1.2 NAME  1.3 STREE:  1.4 CITY-:  2.1 TITLE  2.2 NAME  2.3 STREET  2.4 CITY-:	ve-named corry the corporal signature requirements.	rporation submits this statemation's board of directors. I he with the province of the provinc	0 S TO OFFICERS 1002101	se of changing its registered appointment as registered  #
DELETE   DELETE   Addition   Addi	IGNATURE  2.  ILE  IME  REET ADDRESS  Y'-ST-ZIP  LE  ME  REET ADDRESS  Y-ST-ZIP  LE  ME  REET ADDRESS  Y-ST-ZIP  LE	D GILMAN, MI 12900 S.W.	OFFICERS AN  LES E 61 AVE.	gent and little if applicable	DELETE  DELETE	es, the above authorized by prida Statute:  (E: Registered Ag  13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-5 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-1 3.1 TITLE	ve-named corry the corporal signature requirements.	rporation submits this statemation's board of directors. I he with the province of the provinc	0 S TO OFFICERS 1002101	se of changing its registered appointment as registered  #
ME	IGNATURE  2.  ILE  IME  RRET ADDRESS  Y'-ST-ZIP  LE  ME  REET ADDRESS  Y-ST-ZIP  LE  AE  EET ADDRESS	D GILMAN, MI 12900 S.W.	OFFICERS AN  LES E 61 AVE.	gent and little if applicable	DELETE  DELETE	es, the above authorized by prida Statute:  (E: Registered Ag  13. 1.1 TITLE 1.2 NAME 1.3 STREE: 1.4 CITY-5 2.1 TITLE 2.2 NAME 2.3 STREET 2.4 CITY-1 3.1 TITLE 3.2 NAME	ve-named corry the corporal sis.  gent signature requirements for the corporal sis.  ET ADDRESS ST-ZIP	rporation submits this statemation's board of directors. I he with the province of the provinc	0 S TO OFFICERS 1002101	se of changing its registered appointment as registered  #
4.3 STREET ADDRESS Y-ST-ZIP  DELETE  DELETE  5.1 TITLE 5.2 NAME 5.2 NAME 5.3 STREET ADDRESS F-ST-ZIP  DELETE  DELETE  6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS F-ST-ZIP  Ido hereby certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I made under control that here information indicated on this annual report or supplemental annual report is true and some stated in Section 119.07(3)(k), Florida Statutes. I	IGNATURE  2. ILE IME REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y-SI-ZIP LE REET ADDRESS V-SI-ZIP	D GILMAN, MI 12900 S.W.	OFFICERS AN  LES E 61 AVE.	gent and little if applicable	DELETE  DELETE	es, the above authorized by orida Statute:  (E: Registered Ag  13.  1.1 TITLE  1.2 NAME  1.3 STREET  2.4 CITY-S  3.1 TITLE  3.2 NAME  3.3 STREET  3.4 CITY-S	ve-named corry the corporal sis.  gent signature requires required to the corporal sis.  ET ADDRESS ST-ZIP  T ADDRESS ST-ZIP	rporation submits this statemation's board of directors. I he with the province of the provinc	0 S TO OFFICERS 1002101	se of changing its registered appointment as registered  #
4.4 CITY-ST-ZIP  LE CONTROL DELETE  DELETE  DELETE  5.1 TITLE  5.2 NAME  5.3 STREET ADDRESS  6.4 CITY-ST-ZIP  DELETE  6.1 TITLE  6.2 NAME  6.2 NAME  6.2 NAME  6.3 STREET ADDRESS  6.3 STREET ADDRESS  6.4 CITY-ST-ZIP  I do hereby certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I made under control that the information indicated on this annual report or supplemental annual report is true and some stated in Section 119.07(3)(k), Florida Statutes. I	IGNATURE  2.  ILE  IME  REET ADDRESS  Y-ST-ZIP  LE  ME  REET ADDRESS  Y-ST-ZIP  LE  REET ADDRESS  Y-ST-ZIP  E	D GILMAN, MI 12900 S.W.	OFFICERS AN  LES E 61 AVE.	gent and little if applicable	DELETE  DELETE	es, the above authorized by prida Statute:  13. 1.1 TITLE 1.2 NAME 1.3 STREET 2.4 CITY-S 2.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-S 4.1 TITLE 3.4 LITY-S 4.1 TITLE	ve-named corry the corporal sis.  gent signature requires required to the corporal sis.  ET ADDRESS ST-ZIP  T ADDRESS ST-ZIP	rporation submits this statemation's board of directors. I he with the province of the provinc	0 S TO OFFICERS 1002101	se of changing its registered appointment as registered  #
DELETE 5.1 TITLE  5.2 NAME  5.2 NAME  5.3 STREET ADDRESS  6.5 TITLE  6.1 TITLE  6.1 TITLE  6.2 NAME  6.2 NAME  6.3 STREET ADDRESS  6.3 STREET ADDRESS  6.4 CITY - ST - ZIP  I do hereby certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I made under coats: that leads a property is true and source to add the stated in Section 119.07(3)(k), Florida Statutes. I made under coats: that leads a property is true and source to add the stated in Section 119.07(3)(k), Florida Statutes. I	IGNATURE  2.  ILE  IME  RRET ADDRESS  Y-ST-ZIP  LE  ME  REET ADDRESS  Y-ST-ZIP  E  EET ADDRESS  F-ST-ZIP  E  ME  EET ADDRESS	D GILMAN, MI 12900 S.W.	OFFICERS AN  LES E 61 AVE.	gent and little if applicable	DELETE  DELETE	es, the above authorized by orida Statute:  13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREET 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-S 4.1 TITLE 4.2 NAME	ve-named corry the corporal signature requirements.  gent signature requirements.  ST ADDRESS ST-ZIP  I ADDRESS ST-ZIP	rporation submits this statemation's board of directors. I he with the province of the provinc	0 S TO OFFICERS 1002101	se of changing its registered appointment as registered  #
SET ADDRESS  F-ST-ZIP  EET ADDRESS  F-ST-ZIP  DELETE  DELETE  61 TITLE  62 NAME  63 STREET ADDRESS  64 CITY-ST-ZIP  Letter ADDRESS  64 CITY-ST-ZIP  Letter ADDRESS  64 CITY-ST-ZIP  Letter ADDRESS  65 STREET ADDRESS  64 CITY-ST-ZIP  Letter ADDRESS  65 STREET ADDRESS  65 STREET ADDRESS  66 CITY-ST-ZIP  Letter ADDRESS  67 STREET ADDRESS  68 CITY-ST-ZIP  Letter ADDRESS  69 CITY-ST-ZIP	IGNATURE  2.  ILE  IME  RRET ADDRESS  Y-ST-ZIP  LE  ME  REET ADDRESS  Y-ST-ZIP  E  EET ADDRESS  F-ST-ZIP  E  ME  EET ADDRESS	D GILMAN, MI 12900 S.W.	OFFICERS AN  LES E 61 AVE.	gent and little if applicable	DELETE  DELETE  DELETE	es, the above authorized by orida Statute:  13. 1.1 TITLE 1.2 NAME 1.3 STREET 2.4 CITY-: 3.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-: 4.2 NAME 4.3 STREET	ve-named corry the corporal sis.  gent eignature requires required to the corporal sis.  ET ADDRESS ST-ZIP  T ADDRESS ST-ZIP  I ADDRESS ST-ZIP	rporation submits this statemation's board of directors. I he with the province of the provinc	0 S TO OFFICERS 1002101	se of changing its registered appointment as registered  #
5.4 City-st-zip  EET ADRESS -ST-zip  I do hereby certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes I made under costs: his loss are findicated on this annual report or supplemental annual report is true and accurate and the stated in Section 119.07(3)(k). Florida Statutes I	IGNATURE  2.  ILE  IME  RRET ADDRESS  Y-ST-ZIP  LE  ME  REET ADDRESS  Y-ST-ZIP  E  EET ADDRESS  F-ST-ZIP  E  ME  EET ADDRESS	D GILMAN, MI 12900 S.W.	OFFICERS AN  ILES E  61 AVE.	gent and little if applicable	DELETE  DELETE  DELETE	es, the above authorized by prida Statute:  13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 4.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-S 5.1 TITLE	ve-named corry the corporal sis.  gent eignature requires required to the corporal sis.  ET ADDRESS ST-ZIP  T ADDRESS ST-ZIP  I ADDRESS ST-ZIP	rporation submits this statemation's board of directors. I he with the province of the provinc	0 S TO OFFICERS 1002101	se of changing its registered appointment as registered  #
DELETE 61 TITLE 62 NAME 62 NAME 63 STREET ADDRESS -ST-ZIP 1 do 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 J. made under costs: that loss on the stated in Section 119.07(3)(k). Florida Statutes J.	IGNATURE  2.  ILE  IME  REET ADDRESS  Y-ST-ZIP  LE  ME  REET ADDRESS  Y-ST-ZIP  E  REET ADDRESS  -ST-ZIP  E  E  E  E  E  E  E  E  E  E  E  E  E	D GILMAN, MI 12900 S.W.	OFFICERS AN  ILES E  61 AVE.	gent and little if applicable	DELETE  DELETE  DELETE	es, the above authorized by orida Statute:  IE: Registered Ag  13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 4.1 TITLE 3.2 NAME 3.3 STREET 3.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREET 4.4 CITY-S 5.1 TITLE 5.2 NAME	ve-named corry the corporal sis.  gent eignature requirements and the corporal sis.  ET ADDRESS ST-ZIP  T ADDRESS ST-ZIP  ADDRESS ST-ZIP  ADDRESS ST-ZIP	rporation submits this statemation's board of directors. I he with the province of the provinc	0 S TO OFFICERS 1002101	se of changing its registered appointment as registered  #
62 NAME 62 NAME 63 STREET ADDRESS 1 do hereby certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I made under costs: the logory of the statutes	IGNATURE  2.  ILE  IME  REET ADDRESS  Y-ST-ZIP  LE  ME  REET ADDRESS  Y-ST-ZIP  E  E  E  E  E  E  T  T  T  T  T  T  T	D GILMAN, MI 12900 S.W.	OFFICERS AN  ILES E  61 AVE.	gent and little if applicable	DELETE  DELETE  DELETE	es, the above authorized by orida Statute:  13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 2.1 TITLE 2.2 NAME 3.3 STREET 3.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREET 5.5 TITLE 5.2 NAME 5.3 STREET 5.5 STREET 5.5 STREET 5.5 STREET	ve-named corry the corporal sis.  gent signature requirements of the corporal sis.  ET ADDRESS ST-ZIP  T ADDRESS ST-ZIP  ADDRESS ST-ZIP  ADDRESS ADDRESS ADDRESS	rporation submits this statemation's board of directors. I he with the province of the provinc	0 S TO OFFICERS 1002101	se of changing its registered appointment as registered  #
- ST-ZIP  1 do hereby certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k). Florida Statutes, I made under only that the information indicated on this annual report or supplemental annual report is true and accurate the local statutes.	IGNATURE  2.  ILE  IME  REET ADDRESS  Y-ST-ZIP  LE  ME  REET ADDRESS  Y-ST-ZIP  E  AE  EET ADDRESS  -ST-ZIP  E  ET ADDRESS  -ST-ZIP	D GILMAN, MI 12900 S.W.	OFFICERS AN  ILES E  61 AVE.	gent and little if applicable	DELETE  DELETE  DELETE  DELETE	es, the above authorized by prida Statute:  13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-ST 1.1 TITLE 2.2 NAME 2.3 STREET 3.4 CITY-ST 5.1 TITLE 5.2 NAME 4.3 STREET 4.4 CITY-ST 5.1 TITLE 5.3 NAME 5.3 STREET 5.4 CITY-ST 5.4 CITY-ST 5.5 TITLE 5.5 NAME 5.5 STREET 5.5 CITY-ST	ve-named corry the corporal sis.  gent signature requirements of the corporal sis.  ET ADDRESS ST-ZIP  T ADDRESS ST-ZIP  ADDRESS ST-ZIP  ADDRESS ADDRESS ADDRESS	rporation submits this statemation's board of directors. I he with the province of the provinc	0 S TO OFFICERS 1002101	se of changing its registered appointment as registered  #
I do hereby certify that the information supplied with this filling is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes I and accurate method of the section 119.07(3)(k), Florida Statutes I	IGNATURE  2.  ILE  IME  RRET ADDRESS  Y-ST-ZIP  LE  ME  REET ADDRESS  Y-ST-ZIP  E  AE  EET ADDRESS  -ST-ZIP  E  AT ADDRESS  -ST-ZIP  E	D GILMAN, MI 12900 S.W.	OFFICERS AN  ILES E  61 AVE.	gent and little if applicable	DELETE  DELETE  DELETE  DELETE	es, the above authorized by orida Statute:  13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-ST 1.5 TITLE 2.2 NAME 3.3 STREET 4.2 CITY-ST 5.1 TITLE 5.2 NAME 5.3 STREET 5.4 CITY-ST 6.1 TITLE 5.5 NAME 5.5 STREET 6.5 TITLE 5.6 TITLE 5.6 TITLE 5.7 NAME 5.7 NAME 5.8 STREET 6.7 TITLE 5.8 NAME 5.8 STREET 6.8 TITLE 5.9 NAME 5.8 STREET 6.8 TITLE 6.9 NAME 6.8 STREET 6.8 TITLE 6.9 NAME 6.8 STREET 6.8 STREE	ve-named corry the corporal sis.  gent signature requires required to the corporal sis.  ET ADDRESS ST-ZIP  T ADDRESS ST-ZIP  ADDRESS ST-ZIP  ADDRESS ADDRESS ADDRESS	rporation submits this statemation's board of directors. I he with the province of the provinc	0 S TO OFFICERS 1002101	se of changing its registered appointment as registered  #
further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same lead offset on it.	IGNATURE  2.  ILE  ME  REET ADDRESS  Y-ST-ZIP  LE  ME  REET ADDRESS  Y-ST-ZIP  E  E  E  E  E  ADDRESS  ST-ZIP  E  E  E  T  ADDRESS  ST-ZIP	D GILMAN, MI 12900 S.W. MIAMI FL 33	OFFICERS AN ILES E 61 AVE. 3156	gent and little if applicable ND DIRECTORS	DELETE  DELETE  DELETE  DELETE  DELETE	es, the above authorized by orida Statute:  13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-S 4.1 TITLE 3.2 NAME 3.3 STREET 4.2 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREET 5.4 CITY-S 6.1 TITLE 6.2 NAME 6.3 STREET	ve-named corry the corporals.  gent appature requires req	rporation submits this statemation's board of directors. I he sured when reinstating)  ADDITIONS/CHANGE	6 S TO OFFICERS 10 2/0 1 12/02/96- *****225.0	se of changing its registered appointment as registered  //
The state of the s	IGNATURE  2.  ILE  IME  RRET ADDRESS  Y-ST-ZIP  LE  AE  EET ADDRESS  4-ST-ZIP  E  ET ADDRESS  -ST-ZIP  E  E  E  E  E  E  E  E  E  E  E  E  E	D GILMAN, MI 12900 S.W. MIAMI FL 33	OFFICERS AN ILES E 61 AVE. 3156	gent and little if applicable ND DIRECTORS	DELETE  DELETE  DELETE  DELETE	es, the above authorized by orida Statute:  13. 1.1 TITLE 1.2 NAME 1.3 STREET 1.4 CITY-ST 4.1 TITLE 3.2 NAME 3.3 STREET 4.4 CITY-ST 5.1 TITLE 5.2 NAME 5.3 STREET 6.4 CITY-ST 6.1 TITLE 6.2 NAME 6.3 STREET 6.4 CITY-ST 6.1 TITLE 6.3 STREET 6.4 CITY-ST 6.4 CITY-ST 6.5 STREET 6.5 STREET 6.6 CITY-ST 6.7 CITY-ST	Ve-named cory the corporal se.  gent signature requires required to the corporal set address st. zip.  If Address st. zip.  If Address st. zip.  Address st. zip.  Address st. zip.	rporation submits this statemation's board of directors. I he when reinstating)  ADDITIONS/CHANGE	© 2 TO OFFICERS 10 2 TO 1 12/02/96- 12/02/96- 12/02/96-	se of changing its registered appointment as registered  #