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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT #

P94000072953 (0)

Corporation Name			•			•	_		_
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Principal Place of Business Mailing Address 3012 EAST COMMERCIAL BLVD. 3012 EAST COMMERCIAL BLVD. FORT LAUDERDALE FL 33303 FORT LAUDERDALE FL 33308 3a. Date of Last Report 3. Date Incorporated or Qualified 09/28/1994 06/15/1995 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address 65-0528396 Not Applicable 26 21 \$8.75 Additional Suite Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be П Trust Fund Contribution Added to Fees 28 23 Country $Z_{\rm IP}$ Country 2m30 24 25 29 10. Name and Address of New Registered Agent Name and Address of Current Registered Agent 81 Name Same GOLDING, STEPHEN M. Street Address (P.O. Box Number is Not Acceptable) · 2717 W. CYPRESS CREEK ROAD 1475 W. Cypress Creek Rd. RA FT. LAUDERDALE FL 33309 Suite 204 Ft Lauderdale, 84 Zip Code 33309 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 registered office or 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 agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agont signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 12 Addition DELETE Change : 1. 1 TITLE TUTLE PEJCINOVIC, CHARLOTTE 1.2 NAME NAME 3012 EAST COMMERCIAL BLVD. 1.3 STREET ADDRESS STREET ADDRESS FORT LAUDERDALE FL 33308 14 CITY - ST - ZIP CITY - ST-ZIP Change Control Addition ☐ DELET€ 2 1 TITLE TITLE 22 NAME NAME 23 STREET ADDRESS STHEET ADDRESS 24 CHY-ST-ZIP CITY-ST-ZIP ☐ DELETE Change Addition 3 1 TITLE TITLE 3.2 NAME NAME 3 3 STREET ADDRESS STREET ADDRESS 3 4 CITY-ST-ZIP CITY - ST- ZIP Addition ☐ Chançe DELETE 4 1 TITLE TITLE **900001807**369 -05/03/96--01086--042 4.2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS ***200.00 4.4 CITY - ST - ZIP CITY-ST-712 DELETE ☐ Change Addition 5 1 JULE THILF 5.2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS

14. I 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. I 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 legal effect as if made under cath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name annears in Block 12 or Block 13/47(alignoed, or on an attachment with an address.

TT DELETE

54 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6 1 TITLE 62 NAME

SIGNATURE:

CITY - ST - ZIP

STREET ADDRESS

NAME

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