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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1996

DIVISION OF CORPORATIONS POARROAR (3) DOCLIMENT #

1. Corporation) 0+00	וי <i>י</i> 		MA MI -FE - VI AMBOOFMETON						
Principal Place of Business MS 6398 NW 23RD STREET MARGATE FL 33063			iling Address 6398 NW 23RD STREET MARGATE FL 33063									
								3. Date incorporated or 11/02/1994	Qualified		of Last R	
Principal Place of Business 2a			Mailing Address					4. FEI Number		<u> </u>		Applied For
21								65-0535422 Not Applicable			Not Applicable	
Suite, Apt. #, etc.			Suite, Apt. #, etc.					5. Certificate of Status	Desired			5 Additional Required
City & State			City & State					6. Election Campaign F	_		\$5.0	0 May Be
23			7:0 Cour					Trust Fund Contribut				ed to Fees
Zip Country 25		29	ı hn			ountry		This corporation has Florida Statutes	Yes		x under s	199.032,
24	g. Name and Address of Currer		red Agent	1001				10. Name and Address			Agent	
,					81	Name						
DE HART, DONALD R 6398 NW 23RD STREET						Street A	Address	s (P.O. Box Number is No	t Acceptab	le)		
MARG	ATE FL 33063				83							
					84	City				FI	85 Z	ip Code
or registere familiar with SIGNATURE	o the provisions of Sections 607.050; ad agent, or both, in the State of Flori h, and accept the obligations of, Sections of Sections of Sections	ida Such d tion 607.05	change was authorize 605, Florida Statutes	ed by th	e corp	oration's	board o	on submits this statemen of directors. I hereby acco	for the purept the appo	pose of cha pintment as	nging its registered	registered office d agent. I am
12.	OFFICERS AN	ID DIRECT	ORS	1	3.			ADDITIONS/CHANG	ES TO OFF	ICERS AND	DIRECTO	
1-11.6	P		☐ DELETE 1		1 TITLE						Change	☐ Addition
NAME	HART, DONALD R		13 14		1 2 NAME 1 3 STREET ADDRESS							
STREET ADDRESS	6398 NW 23RD ST											
CITY - ST - ZIP	MARGATE FL				4 CHY-SE-ZIP						Change	Addition
TITLE NAME	Do Haar Doug	. 0	Proceed		2 NAME					·	onenge	
STREET ADDRESS	DE HART, DONAL 4398 N.W. 23R MARGATE, FLA.	10 A. A. 57	-			ADDRESS						
CITY-ST-ZIP	MARGATE FLA.	33	063	- 1	4 CITY - S							
TITLE			DELETE 3 1 T		1 TIFLE					[Change	Addition .
NAME				3	2 NAME							
STREET ADDRESS				3	3 STREF	T ADDRESS						
CITY - ST- ZIP		.,,		3	4 CITY - S	ST-ZIP	ļ					
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STREET ADDRESS						LADORESS						
CITY - ST - ZIP			DELETE		4 CUTY - S 1 TiTLE	51 - 71F	 			r	Change	☐ Addition
TITLE					2 NAME					L	D.,ango	
NAME STREET ADDRESS						I ADDRESS						
CITY-ST-ZIP					a Since 4 City-S							
TITLE			DELETE		1 Bille	·	1	·•		[Change	Addition
NAME				6	2 NAME							
STREET ADDRESS				6	3 STHEE	ADDRESS						
							1					

14. I do hereby certify that the information supplied with this fling is voluntarily turnished 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 arrival report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; 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 appears in Block 12 or Block 13 if changed or organisation by the address.

SIGNATURE:

| DOMAN | Definition of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or organisation and that my name appears in Block 12 or Block 13 if changed or organisation and the properties of the corporation of the corporation of the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 12 or Block 12 or Block 13 if changed or organisation of the corporation of the corpor

APRIL 29,1996 (954)974-0984