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CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

	1996	SOURCE DIVISION O	F CORPORATIONS		
DOCU 1. Corporatio	MENT # P94	1000082136 ((O)		
MOR	rgan J. Laur, P.A.			1.48811811 (1.8.4811) 8(8(1.8.611)	
Principal Place	e of Business	Mailing Address		n seatther the falls billet and	e manin manut meran hanna timbe hidan aktua ditia di
	TLANTIC AVENUE		1980 N. ATLANTIC AVENUE		
SUITE 615 COCOA B	D BEACH FL 32931	SUITE 615 COGOA BEACH FL	22021		
***************************************		OOOON BENOTI FE	32331	3. Date Incorporated or Qualified	
2. Principal Pl	lace of Business	2a. Mailing Address		11/02/1994	01/25/1995
1	NAC OF EGGINOUS	26. Walling Address		4. FET Number 59-3282697	Applied For
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			Not Applicable
2		27		5. Certificate of Status Desired	\$8.75 Additional Fee Required
িty & State	9	City & State		6. Election Campaign Financing	\$5.00 May Be
Zip	Country	28		Trust Fund Contribution	Added to Fees
4	25	Zip 29	Country 30	8. This corporation has fiability for	or intangible tax under s. 199,032,
	9. Name and Address of Cu		_1301	Florida Statutes Ye 10. Name and Address of New	es No
			81 Name		The state of the s
	GAN, J L ESQ		82 Street	Address (P.O. Box Number is Not Accept	akila)
	N. ATLANTIC AVENUE		- Guecky		atriej
SUITE	The state of the s		83		
しいしい	A BEACH FL 32931		84 City		85 Zip Code
5550					
	to the provisions of Sections 607.	0502 and 607 1509 Florida Club 4	1 1		
	to the provisions of Sections 607,0 ed agent, or both, in the State of	0502 and 607.1508, Florida Statut Florida Such change was authoriz	1 1	orporation submits this statement for the p board of directors. I nereby accept the ap	
11. Pursuant t or register familiar wit			1 1	orporation submits this statement for the p board of directors. I nereby accept the ap	
1. Pursuant t or register familiar wit	Signature, typed or printed name of registered	agent and the if applicable gno	1 1		
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Mingam C Aur Morgan J. Laur 3/12/96 407/783-0054

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR