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

PROFIT CORPORATION ANNUAL REPORT

SIGNATURE: SIGNATURE AND TYPES



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

	1996 🔏	DIVISION C	OF CORPORATIONS			
DOCUN L. Corporation	MENT # P940	00091531 (1)			
	SI & SONS, INC.					
Principal Place	of Business	Mailing Address		I	BBNS BOND WIR! NOON O	1100 (1101 HOL 1061
1420 SE 14 DR		1420 SE 14 DR				
DEERFIELD BCH FL 33441 US		DEERFIELD BCH FL 33441 US				
		•		3. Date Incorporated or Qualified 3a. Date of Last Report 12/16/1994 03/24/1995		
Principal Pla	lace of Business	2a. Mailing Address		4. FEI Number		Applied For
		Suite, Apt #, etc.		65-0552359	\$8.	Not Applicable 75 Additional
-Suite, Apt + -	#, EtC.	27 Stille, Apr. #, etc.		5. Certificate of Status Desired	7 - 1	e Required
City & State	6	City & State		6. Election Campaign Financing		00 May Be
L - Zip	Country	28	Country	Trust Fund Contribution 8. This corporation has liability for it	- AU	ded to Fees s 199.032,
2 14.	25	29	30	Florida Statutes	□No	
1	g. Name and Address of Cur	rrent Registered Agent	81 Name	10. Name and Address of New R	legistered Agent	<u> </u>
	AX & FINANCIAL SERV		14	ress (P.O. Box Number is Not Acceptable 20	11/E	
	FEDERAL HWY STE D		83			
HOLLYV	WOOD FL 33020-4621		84 City 7	ERFICIO BU	Ø FI 85	Zip Code
or equiptor	to the provisions of Sections 607.0 med agent, or both, in the State of Fulth, and accept the obligations of S	Horida. Such change was autho	orized by the corporation's boa	oration submits this statement for the pur and of directors. I hereby accept the app	rpose of changing fointment as registe	ts registered offic red agent. I am
or register familiar w. IGNATURE (word agent, or both, in the State of F th, and accept the obligations of S women, Test or privatives of consistent	Horida. Such change was autho	orized by the corporation's boa	ration submits this statement for the pur and of directors. I hereby accept the app	DATE TICERS AND DIREC	TORS IN 12
or register familiar w. IGNATURE (2.	wed agent, or both, in the State of F th, and accept the obligations of S System. Next or privations of translated OF FICE RS	Florida Stuch change was author Section 607.0505 Florida Statu	(NOTE: Regelered Agent sgnature resp.) 13. 1.1 Title	oration submits this statement for the pur and of directors. I hereby accept the app and when renstating?	DATE DATE	TORS IN 12
or register familiar w. GNATURE (2. L?	ord agent, or both, in the State of Fi.th, and accept the obligations of State of Fire and Architecture of the obligations of State of Fire RS OF FICE RS DP ALONGI, MICHAEL	Florida Such change was author Soction 607.0505 Florida Statu	(NOTE: Registered Agent signature requirements) 13. 1.1 Title 12 NAME.	oration submits this statement for the pur and of directors. I hereby accept the app and when renstating?	DATE TICERS AND DIREC	TORS IN 12
or register farmhar w. GNATURE L. L. ME ME	ored agent, or both, in the State of Futh, and accept the obligations of State of State of the obligations of State	Florida Such change was author Soction 607.0505 Florida Statu	INCIL: Regulared Agent sgneture requirements of the second second size of the second s	oration submits this statement for the pur and of directors. I hereby accept the app and when renstating?	DATE TICERS AND DIREC	TORS IN 12
or register familiar w. GNATURE (t. P ME ME HELL AUDRESS Y SL-70°	ord agent, or both, in the State of Fi.th, and accept the obligations of State of Fire and Architecture of the obligations of State of Fire RS OF FICE RS DP ALONGI, MICHAEL	Florida Such change was author Soction 607.0505 Florida Statu	(NOTE: Registered Agent signature requirements) 13. 1.1 Title 12 NAME.	oration submits this statement for the pur and of directors. I hereby accept the app and when renstating?	DATE TICERS AND DIREC	TORS IN 12
or register familiar w. GNATURE (t. L. ME HET AUDRESS Y S1-712	ored agent, or both, in the State of Futh, and accept the obligations of State of State of the obligations of State	Rondla Such change was author Soction 607.0505 forida Statu	In a street address in the corporation of the corpo	oration submits this statement for the pur and of directors. I hereby accept the app and when renstating?	DATE DATE ICERS AND DIRECT Change	TORS IN 12
or register familiar w. GNATURE (L. L ² ME HELLAUDRESS Y SL-70° U ME HELLAUDRESS	DP ALONGI, MICHAEL 1420 SE 14 DR DEERFIELD BCH FL	Rondla Such change was author Soction 607.0505 forida Statu	In a street Adoress NOTE Regulated Agent signature request 13.	oration submits this statement for the pur and of directors. I hereby accept the app and when renstating?	DATE DATE ICERS AND DIRECT Change	TORS IN 12
or register familiar w. GNATURE (t. 12 ME HELL AUDRESS Y SI-70 U ME HELL ADDRESS (Y SI-70) (F SI-70)	DP ALONGI, MICHAEL 1420 SE 14 DR DEERFIELD BCH FL	Rondla Such change was author Soction 607.0505 forida Statu	In a street address in the corporation of the corpo	oration submits this statement for the pur and of directors. I hereby accept the app and when renstating?	DATE DATE ICERS AND DIRECT Change	TORS IN 12 Pe Addition ge Addition
or register familian w. GNATURE (2. LF ME HELF AUDRESS Y SI-70° U ME HELF AUDRESS (Y SI-70° U) ME HELF AUDRESS (Y SI-70° U) LF SI-70°	DP ALONGI, MICHAEL 1420 SE 14 DR DEERFIELD BCH FL	Florida Such change was author Soction 607.0505 forida Statu	In a street address (NOTE: Regulated Agent signature requer 13. 1.1 Title 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-S1-ZIP 2.3 STREET ADDRESS 2.4 CITY-S1-ZIP	oration submits this statement for the pur and of directors. I hereby accept the app and when renstating?	DATE CERS AND DIRECT Chan	TORS IN 12 Pe Addition ge Addition
or register familiar w. GNATURE (L. L. L. ME HHEL AUDRESS Y SI-70' LI ME HHEL ADGRESS (Y SI-70' LI ME HHEL ADGRESS (Y SI-70' LI ME HHEL ADGRESS (Y SI-70' LI ME HHEL ADGRESS	ored agent, or both, in the State of Furth, and accept the obligations of State of Further Parks are a replaced to CFFICE RS DP ALONGI, MICHAEL 1420 SE 14 DR DEERFIELD BCH FL	Florida Such change was author Soction 607.0505 forida Statu	ONZECT by the corporation's bootets. (NOTE: Regulated Agent signature requirements) 13. 1.1 Title 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE	oration submits this statement for the pur and of directors. I hereby accept the app and when renstating?	DATE CERS AND DIRECT Chan	TORS IN 12 Pe Addition ge Addition
or register familiar w. GNATURE (E. L.	ored agent, or both, in the State of Furth, and accept the obligations of State of Further Parks are a replaced to CFFICE RS DP ALONGI, MICHAEL 1420 SE 14 DR DEERFIELD BCH FL	DELETE	INOTE: Regulated Agent signature required 13. 1.1 Title 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	oration submits this statement for the pur and of directors. I hereby accept the app and when renstating?	DATE ICERS AND DIREC Chan	et agent. Fam ETORS IN 12 ge
or register familiar w. GNATURE (E. L.	ored agent, or both, in the State of Furth, and accept the obligations of State of Further Parks are a replaced to CFFICE RS DP ALONGI, MICHAEL 1420 SE 14 DR DEERFIELD BCH FL	Florida Such change was author Soction 607.0505 forida Statu	ONZECT by the corporation's bootes. (NOTE: Regulated Agent signature requirements) 13. 1.1 Title 12 NAME 13 STREEL ADDRESS 1.4 CITY-SI-ZIP 2 1 TITLE 22 NAME 23 STREEL ADDRESS 24 CITY-SI-ZIP 3.1 TITLE 32 NAME 33 STREEL ADDRESS 34 CITY-SI-ZIP 4.1 TITLE	oration submits this statement for the pur and of directors. I hereby accept the app and when renstating?	DATE CERS AND DIRECT Chan	et agent. Fam ETORS IN 12 ge
or register familiar w. GNATURE (E. LE ME HELF AJDRESS (V. SLEZIE LE ME HELF ADDRESS (V. SLEZIE LE ME HELF ADDRESS (V. SLEZIE LE ME	red agent, or both, in the State of F .th, and accept the obligations of S OFFICE RS DP ALONGI, MICHAEL 1420 SE 14 DR DEERFIELD BCH FL	DELETE	ONZECT by the corporation's bootes. (NOTE: Regulated Agent signature requirements) 13. 1.1 Title 12 NAME 13 STREEL ADDRESS 1.4 CITY-SI-ZIP 2 1 Title 22 NAME 23 STREEL ADDRESS 24 CITY-SI-ZIP 3.1 TITLE 32 NAME 33 STREEL ADDRESS 34 CITY-SI-ZIP 4 1 TITLE 42 NAME	oration submits this statement for the pur and of directors. I hereby accept the app and when renstating?	DATE ICERS AND DIREC Chan	et agent. Fam ETORS IN 12 ge
or register farmhar w. GNATURE (E. L. ME HELF AUDRESS Y SI-70° Uf ME HELF AUDRESS IY SI-70° LE ME HELF AUDRESS IN SI-70° LE LE ME HELF AUDRESS IN SI-70° LE LE LE ME HELF AUDRESS IN SI-70° LE	red agent, or both, in the State of F .th, and accept the obligations of S OFFICE RS DP ALONGI, MICHAEL 1420 SE 14 DR DEERFIELD BCH FL	DELETE	ONZECT by the corporation's bootes. (NOTE: Regulated Agent signature requirements) 13. 1.1 Title 12 NAME 13 STREEL ADDRESS 1.4 CITY-SI-ZIP 2 1 TITLE 22 NAME 23 STREEL ADDRESS 24 CITY-SI-ZIP 3.1 TITLE 32 NAME 33 STREEL ADDRESS 34 CITY-SI-ZIP 4.1 TITLE	oration submits this statement for the pur and of directors. I hereby accept the app and when renstating?	DATE ICERS AND DIREC Chan	et agent. Fam ETORS IN 12 ge
OF REGISTER FAMILIARY W. GNATURE (2. LP ME HELF AJDRESS Y SIL-70° ME HELF ADDRESS IV SIL-70° ME HELF	red agent, or both, in the State of F .th, and accept the obligations of S OFFICE RS DP ALONGI, MICHAEL 1420 SE 14 DR DEERFIELD BCH FL	DELETE	ONZECT by the corporation's bootets. (NOTE: Regulated Agent signature requirements) 13. 1.1 Title 12 NAME 13 STREEL ADDRESS 1.4 CITY-ST-ZIP 2 TITLE 22 NAME 23 STREEL ADDRESS 24 CITY-ST-ZIP 3.1 TITLE 32 NAME 33 STREEL ADDRESS 34 CITY-ST-ZIP 4 TITLE 42 NAME 43 STREEL ADDRESS	oration submits this statement for the pur and of directors. I hereby accept the app and when renstating?	DATE ICERS AND DIREC Chan	TORS IN 12 ge Addition ge Addition ge Addition
OF REGISTER FARMER OF STATE OF	red agent, or both, in the State of F .th, and accept the obligations of S OFFICE RS DP ALONGI, MICHAEL 1420 SE 14 DR DEERFIELD BCH FL	DELETE DELETE	ONZECT by the corporation's bookites. (NOTE: Regulated Agent signature requirements) 13. 1.1 Title 12 NAME 13 STREEL ADDRESS 1.4 CITY-ST-ZIP 2 1 Title 22 NAME 23 STREEL ADDRESS 24 CITY-ST-ZIP 3.1 TITLE 32 NAME 33 STREEL ADDRESS 34 CITY-ST-ZIP 4 1 TITLE 42 NAME 43 STREEL ADDRESS 4.4 CITY-ST-ZIP 4 STREEL ADDRESS 3 CITY-ST-ZIP 4 STREEL ADDRESS 3 CITY-ST-ZIP 4 STREEL ADDRESS 3 CITY-ST-ZIP 4 STREEL ADDRESS 4 CITY-ST-ZIP	oration submits this statement for the pur and of directors. I hereby accept the app and when renstating?	DATE ICERS AND DIRECT Chan	TORS IN 12 ge Addition ge Addition ge Addition
OF register familiar was a second of the control of	red agent, or both, in the State of F. th, and accept the obligations of S. OF FICE RS. DP ALONGI, MICHAEL 1420 SE 14 DR DEERFIELD BCH FL	DELETE DELETE	ONIZED by the corporation's bootes. (NOTE: Regulated Agent signature requirements) 13. 1.1 Title 12 NAME 13 STREEL ADDRESS 1.4 CITY-ST-ZIP 2 TITLE 22 NAME 23 STREEL ADDRESS 24 CITY-ST-ZIP 3.1 TITLE 32 NAME 33 STREEL ADDRESS 34 CITY-ST-ZIP 4 TITLE 42 NAME 43 STREEL ADDRESS 44 CITY-ST-ZIP 5 TITLE	oration submits this statement for the pur and of directors. I hereby accept the app and when renstating?	DATE ICERS AND DIRECT Chan	et agent. Tann ETORS IN 12 ge
OF register familian w. GNATURE (2. III 2. III 2. III 2. III 2. III 2. III 3. II 3. I	red agent, or both, in the State of F. th, and accept the obligations of S. OF FICE RS. DP ALONGI, MICHAEL 1420 SE 14 DR DEERFIELD BCH FL	DELETE D	ONIZED BY the corporation's Documents. 13. 1.1 TITLE 12 NAME 13 STREEL ADDRESS 1.4 CITY-ST-ZIP 2 TITLE 22 NAME 23 STREEL ADDRESS 24 CITY-ST-ZIP 3.1 TITLE 32 NAME 33 STREEL ADDRESS 34 CITY-ST-ZIP 4 TITLE 42 NAME 43 STREEL ADDRESS 44 CITY-ST-ZIP 5 TITLE 52 NAME 53 STREEL ADDRESS 54 CITY-ST-ZIP 5 TITLE 52 NAME 53 STREEL ADDRESS 54 CITY-ST-ZIP 5 TITLE 52 NAME 53 STREEL ADDRESS 54 CITY-ST-ZIP	oration submits this statement for the pur and of directors. I hereby accept the app and when renstating?	DATE ICERS AND DIRECT Chan Chan	TORS IN 12 ge Addition ge Addition ge Addition ge Addition
or register farmer w. IGNATURE (2. III.? MME IMPETATORESS LY SI-70° REF MAN IMPETATORESS ITY SI-70° INF	red agent, or both, in the State of F. th, and accept the obligations of S. OF FICE RS. DP ALONGI, MICHAEL 1420 SE 14 DR DEERFIELD BCH FL	DELETE DELETE	ONOTE: Regulative Agent signature required 13. 1.1 Title 12 NAME 13 STREEL ADDRESS 1.4 CITY-ST-ZIP 2 TTITLE 22 NAME 23 STREEL ADDRESS 24 CITY-ST-ZIP 3.1 TITLE 32 NAME 33 STREEL ADDRESS 34 CITY-ST-ZIP 4 TTITLE 42 NAME 43 STREEL ADDRESS 44 CITY-ST-ZIP 5 TTITLE 52 NAME 53 STREEL ADDRESS 64 CITY-ST-ZIP 5 TTITLE 52 NAME 53 STREEL ADDRESS 64 CITY-ST-ZIP 6 TTITLE 53 NAME 65 STREEL ADDRESS 64 CITY-ST-ZIP 6 TTITLE	oration submits this statement for the pur and of directors. I hereby accept the app and when renstating?	DATE ICERS AND DIRECT Chan	TORS IN 12 ge Addition ge Addition ge Addition ge Addition
or register familiar was its anature (2. The control of the contr	red agent, or both, in the State of Furth, and accept the obligations of Section of the Community of the Com	DELETE D	ONDIL Regulated Agent signature required 13. 1.1 Title 12 NAME 13 STREEL ADDRESS 1.4 CITY-ST-ZIP 2 TTITLE 22 NAME 23 STREEL ADDRESS 24 CITY-ST-ZIP 3.1 TITLE 32 NAME 33 STREEL ADDRESS 34 CITY-ST-ZIP 4 TTITLE 42 NAME 43 STREEL ADDRESS 44 CITY-ST-ZIP 5 TTITLE 52 NAME 53 STREEL ADDRESS 54 CITY-ST-ZIP 5 TTITLE 52 NAME 53 STREEL ADDRESS 54 CITY-ST-ZIP 5 TTITLE 52 NAME 53 STREEL ADDRESS 54 CITY-ST-ZIP 6 TTITLE 52 NAME 53 STREEL ADDRESS 54 CITY-ST-ZIP 6 TTITLE	oration submits this statement for the pur and of directors. I hereby accept the app and when renstating?	DATE ICERS AND DIRECT Chan Chan	TORS IN 12 ge Addition ge Addition ge Addition ge Addition
OF register familian working and turke (2. The man in the following section of the following se	red agent, or both, in the State of Furth, and accept the obligations of Section of the Community of the Com	DELETE D	ONOTE: Regulative Agent signature required 13. 1.1 Title 12 NAME 13 STREEL ADDRESS 1.4 CITY-ST-ZIP 2 TTITLE 22 NAME 23 STREEL ADDRESS 24 CITY-ST-ZIP 3.1 TITLE 32 NAME 33 STREEL ADDRESS 34 CITY-ST-ZIP 4 TTITLE 42 NAME 43 STREEL ADDRESS 44 CITY-ST-ZIP 5 TTITLE 52 NAME 53 STREEL ADDRESS 64 CITY-ST-ZIP 5 TTITLE 52 NAME 53 STREEL ADDRESS 64 CITY-ST-ZIP 6 TTITLE 53 NAME 65 STREEL ADDRESS 64 CITY-ST-ZIP 6 TTITLE	oration submits this statement for the pur and of directors. I hereby accept the app and when renstating?	DATE ICERS AND DIRECT Chan Chan	TORS IN 12 ge Addition ge Addition ge Addition ge Addition