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PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

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DOCUMENT #	P94000092107	(9)		

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Principal Pla	ace of Business	2a. Mailing Address				4. FEI Number	650	5410	119	Applied For
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Suite, Apt. #	#, etc.	Suite, Apt. #, etc.				5. Certificate of Statu	s Desired	[]	•	Additional
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	9. Name and Address of Curren	L	130			10. Name and Addre			Agent	
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AGREST	A, CONSTABLE		}	82 Stre	ot Addro	ss (P.O. Box Number is	Not Accents	able)		
	OLLAND DRIVE			المراد المراد	- CONTRACTOR					
SUITE 11				83						
	ATON FL 33431		}	84 City					85 Z	o Code
				Oity				Fi	_ 53 -1	3 0000
familiar wit	to the provisions of Sections 607.0502 red agent, or both, in the State of Floric th, and accept the obligations of, Secti	ion 607.0505, Florida Statute	s.					•	Ū	~
	Scanature, lyped or printed name of registered agent	and the if applicable (N	OTE Registered	Agent signat	are required	when reinstating)		DATE		
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PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-9-96 994-0881