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

Corpo ano	TT TOUTIO	# P9500 OR SUCCESS, INC		0209 (3	3)								I Ba hir 1840 Ha bi	
Principal Place of Business Mailing Address														
505 US HWY 1 STE 312 JUPITER FL 33477				50 S. US HWY 1 STE 312 JUPITER FL 33477										
US			US	US				1			te of Last Report 3/17/1995			
2. Principal P	ace of Busin	ess		2a. Mailing Address					4. FEI Number				Applied For	
Suito Ant	# oto		26	Suite. Apt. #, etc.					65-0544426				Not Applicable	
Suite, Apt. #, etc.				27				5. Certificate of Status	Desired			Additional Required		
City & State				City & State				6. Election Campaign Financing				·· · · · · · · · ·	O May Be	
23			28	28					Trust Fund Contribut				о мау ве d to Fees	
Zip 24	Country 25			Zip Co					This corporation has liability for intangible tax under s 199.03 Florida Statutes				199.032,	
Name and Address of Current Registered Agent									10. Name and Addres	of New R	egistered A	gent		
						1	Name							
	BECKY Y		8	2	Street A	ddress (P.O. Box Number is Not Acceptable)								
19670 BEACH ROAD, STE. 404 JUPITER FL 33469						3								
VO HER I C OUTUG										· · · · · · · · · · · · · · · · · · ·				
						4	City	FL				1 1 '	Code	
11. Pursuant i or register familiar wi	to the provisi red agent, or th, and acce	ons of Sections 607.050 both, in the State of Flor pt the obligations of, Sec	12 and 607, rida. Such c stion 607,05	1508, Florida Statut change was authoriz 505, Florida Statutes	es, the above red by the co s.	rpo	amed co ration's	rporation board o	on submits this statement of directors. I hereby acce	for the purp pt the appo	pose of char pintment as a	iging its re egistered	egistered office agent. I am	
·	Signature typed	or printed name of registered ager			DTE: Registered Aç	ent	signature re	quired wh			DATE			
12.	D	OFFICERS AN	ND DIRECT	D DIRECTORS					ADDITIONS/CHANGES TO OFFICERS AND D					
NAME							1. 1 Tille D				×] Change	☐ Addition	
STREET ADDRESS 19670 BEACH ROAD, STE. 4			404				12 STREET ADDRESS Ha		alm, Becky Y.					
CITY-ST-ZIP	11 10 17 17 17 17 17 17 17 17 17 17 17 17 17						10		2 Ocean Dr	ive	400			
TITLE				☐ DELETE		2 1 TITLE		vu i	o Beach, F	1 3 3	408] Change	Addition	
NAME							2.2 NAME							
STREET ADDRESS							DDRESS							
CITY-SI-ZIP TITLE	IF			[7] DELETE		2 4 CiTY - ST - ZIP 3 1 TITLE								
NAME											L	Change :	☐ Addition	
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CITY ST-ZIP					3 4 CITY		- 1							
TITLE				☐ DELETE	4. 1 TITLE							Change	Addition	
NAM;					4.2 NAMI							·		
STREET ADDRESS					4 3 STRE	ET A	DDRESS							
CITY - ST-ZIP	ļ			<u>.</u>	4.4 CITY -	SI-	ZIP							
THE	İ			DELETE		5 1 TITLE						Change	☐ Addition	
NAME					5.2 NAME									
STREET ADDRESS					5 3 STREI		- 1							
CITY+S*-ZIP TITLE				DELETE	5.4 C(TY -		ZIP					Chacca	D Marrie	
NAME				F) pricir	6. 1 TITLE 6.2 NAME		İ				L	Change	Addition	
STREET ADDRESS					6.3 STREE		DUBLEC							
CITY-ST-ZIP					6.3 STREE									
	v certify that	the information supplied	with this fili	ng is voluntarily furn	ished and do	05 I	not oua!	5/ for th	ne exemption stated in Sa	etico 110 0	17/21/let Flori	do Chabia	14	

recording 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 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 on an attachment with an address.

SIGNING OFFICER OR DIRECTOR

SIGNATURE: SIGNATURE AND THE OF P

4-16-96 (407)575-5454

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