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

PROFIT CORPORATION ANNUAL REPORT



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

1996	T. T. S.	DIVISION	OF CORPO	RATI	ONS					
DOCUMENT #	P950000	02584	(7)	,						
PKSR, CORP.							 	 11:10 12:11:11:11:11		1118† 1611) (118 † 1831)
Principal Place of Business		lailing Address								
4620 JEFFERSON STREET HOLLYWOOD FL 33021	4620 JEFFERSON STREET HOLLYWOOD FL 33021									
							3. Date incorporated or Qualified 01/10/1995	3a. Da	te of Last F	Report
2. Principal Place of Business	28	. Mailing Address			-		4. FEI Number			Applied For
21	26						65-0660147		J	Not Applicable
Suite, Apt. #, etc.	27	Suite, Apt. #, etc			- <u> </u>		5. Certificate of Status Desired			5 Additional Required
City & State	28	City & State					Election Campaign Financing Trust Fund Contribution			00 May Be
Zip 25	Country 29	Zip	30 Co	untry			8. This corporation has liability for Florida Statutes	intangible i		
9, Name and	Address of Current Regis	tered Agent		I			10. Name and Address of New	Registered	Agent	
DODINGON DETER	n			81	Nam	е				
ROBINSON, PETER I 4620 JEFFERSON S				82	Stree	t Addres	s (P.O. Box Number is Not Accepta	ble)		
HOLLYWOOD FL 33			83				·			
1145514144514144	<i>7</i> 21									
				84	City			FI	85 Zi	o Code
familiar with, and accept the	or Sections 607,0502 and 60 n, in the State of Florida. Such e obligations of, Section 607.	(1505, Florida Stati		corpe	ואטונגווטיו	s Doaru	on submits this statement for the puot directors. I hereby accept the app	pose of choontment as	anging its r s registered	egistered office I agent. I am
12.	OFFICERS AND DIREC		13.	·	bry and	o response	ADDITIONS/CHANGES TO OFF		DIRECTO	RS IN 12
TITLE D		DELETE	1. 1	TITLE	,	1			Change	Addition
	N, STEPHANIE A		1.2 N	IAME						
	FERSON STREET		1.3 S	STREET	ADDRESS	i				
TITLE D	OD FL 33021	C) Otter		HY-SI	- ZIP	<u> </u>				
•	N, KEVIN J	☐ DELETE	2.1						Change	Addition
	FERSON STREET		221		ADDRESS					
i i	OD FL 33021		1	ITY-ST						
TITLE D		DELETE	3 1 1		- 211	· 			Change	Addition
	n, peter d		3.2 N	IAME				•		
	FERSON STREET		3.3 9	STREET	ADDRESS	3				
· · · · · · · · · · · · · · · · · · ·	OD FL 33021		3.40	ITY-ST	- ZIP	ļ				
TITLE		☐ DELETE	4.17					[Change	Addition
NAME STREET ADDRESS			4.2 N							
CITY · ST - ZIP					ADDRESS					
TITLE		☐ DELETE	5 1 T	ITY-ST ITLF	- 216	 -			Change	Addition
NAME			5.2 N					·	Criange	
STREET ADDRESS					DDRESS					
CITY-ST-ZIP	·		5.4 CI	ITY-ST	- ZIP					
TITLE		☐ DELETE	6.1T	ITLE			· · · · · · · · · · · · · · · · · · ·		Change	☐ Addition
NAME			62 N	AME						
STREET ADDRESS					DDRESS					
Crity-St-ZrP 14. I do hereby certify that the in	nformation supplied with this	ing is voluntarily fo	6.4 Cu urnished and	Ty-ST- does	not au	alify for the	ne exemption stated in Section 119.	07/3VL) FIG	rido Ctot de	00 16 -45

certify that the information indicated on his 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 compration 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 changing, of on the attachment with an address.

SIGNATURE: _

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-26-96 (954) 966-4896.

CR2E034 (12/95)