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

1. Corporation	n Name	# P9500 SACTIONS, INC.		15 4 07 (8)					
Principal Place of Business Mailing Address										
2325 DESOTA DR. FT. LAUDERDALE FL 33301			2	2325 DESOTA DR. FT. LAUDERDALE FL 33301						
								01/20/1995	Date of Last F	Report
2. Principal Place of Business				2a. Mailing Address				4. FEI Number		Applied For
Suite, Apt. #, etc.				Suite, Apt. #, etc.				45-0551027	40.7	Not Applicable
22				27				5. Certificate of Status Desired		5 Additional Required
Oity & State				City & Stale				6. Election Campaign Financing Trust Fund Contribution		00 May Be ed to Fees
Zıp	Country			Zip Cou				8. This corporation has liability for intangib		·-····································
24	[25]			29 30				Florida Statutes Yes N		
	9. Name	and Address of Currer	nt Regist	tered Agent		Τ.		10. Name and Address of New Register	ed Agent	
DI 6011	ATILIBE 5				81		Name			
Bloch, Stuart e 2600 N. Military Trail					82	1	Street Addre	ess (P.O. Box Number is Not Acceptable)		
4TH FLOOR				•					***************************************	
BOCA RATON FL 33431					84	+	City	E ∎ 85 Zip Code		ip Code
11 Purcuant t	a the provisi	one of Soctone 607 0500	and 607	1500 Etorido Statuto	c the chous	Ţ.	anad samar	ation submits this statement for the purpose of	*L	and the same of the same
or register	ed agent, or	both, in the State of Flori pt the obligations of, Sect	da. Such	change was authorize	s, the above- id by the corp	001	ration's board	d of directors. Thereby accept the appointmen	t as registered	d agent. Lam
SIGNATURE	Standard band	or printed name of registered agent	pod ten if a	Akon Mon	C. Election and Acres	nt i	signature required	Labora estimated total		
12.	Old Billion (1)100	OFFICERS AN		·	13.	-111 -2	agrana rockireo	when reinstalling! CIAT ADDITIONS/CHANGES TO OFFICERS A		ORS IN 12
TITLE	D DEC				1. 1 TITLE	1. 1 TITLE			☐ Change	·····
NAME										
STREET ADDRESS				1.3			NOORESS			
CITY - ST - ZIP							- 715			
TITLE	D COOL DODEDT W			DELETE			ļ		Change	Addition
NAME	ESSEX, ROBERT W 2325 DESOTA DR.					2.2 NAME				
STREET ADDRESS	FT. LAUDERDALE FL 33301					2.3 STHEET ADDRESS				
CITY-ST-ZIP TITLE	D D	DENDALE PL 33301		[] DELETE		51-	-Z(P			FD Addition
NAME	HARRIS, LAWRENCE			4.22		3 1 TITLE 3 2 NAME			Change	Addition
STREET ADDRESS	2325 DESOTA DR.			I		Δĭ	ADDRESS	•		
CITY-S1-7₽	ET I ALIDEDDALE EL 20001			340						
TITLE				DELETE	4. 1 THLE				[] Change	Addition
NAME					4.2 NAME				-	
STREET ADDRESS					4 3 STREET	A[DDRESS			
CITY-ST-ZIP					4.4 CHY-5	3Ţ.	ZIP			
TITLE				DELETE	5 1 TITLE				[] Change	☐ Add-tion
NAME.					5.2 NAME					
STREET ADDRESS					5.3 STREET	Αl	DDRESS			
CITY-ST-ZIP			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Driete	5.4 CITY - S	<u> </u>	7IP		F 05	Fil Address
TISLE				DELETE	6. 1 TITLE				Change	Addition
NAME PARECE NO ESCOCI					6.2 NAME					
STREET ADDRESS					6.3 STREET ADDRESS			•		
CrTY - S1 - ZiP					6.4 CITY - S	1-	70°			

14. I do hereby certify 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 contraction 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 change if or on an attachment with an addition.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED HAME OF SUMING OFFICER OR DIRECTOR

4-28-96 (154) 491-8970
Date Date Despire Prices #