## 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       |          |  |
|------------|----------|--|
| DOCUMENT # | DOECCOCO |  |

|   | MENT # P950<br>On Financial Group                                      |   | (7)   |  |  |
|---|--|---|---|--|--|
| Principal Place of 7368 PALMDAL LANTANA FL 3      | E DR   | Mailing Address<br>7368 PALMDALE D<br>LANTANA FL 3346 |   |  |  |
| 2. Principal Plac                                 | of Dusings   |   |   | 3. Date Incorporated or Qualified 3a. Date of Last Report 01/31/1995   |  |
| 21  | 2a. Mailing Address  |   |   | 4. FEI Number Applied For  |  |
| Suite, Apt. #, etc.  Suite. Apt. #, etc.          |  | 05 -0374906   Not Applicable                          |   |  |  |
| 22  |  | 27  |   | 5. Certificate of Status Desired See Required Fee Required   |  |
| City & State City & State                         |  | ·   | 6. Election Campaign Financing \$5.00 May Be          |  |  |
| 23  |  | 28  |   | Trust Fund Contribution Added to Fees  |  |
| Ζφ<br><b>24</b>                                   | Country<br>25  | Zip   | Country   | 8. This corporation has liability for intangible tax under s. 199.032,   |  |
| 24  | 9. Name and Address of Cu  | rent Registered Agent                                 | [30]  | Florida Statutes Yes No  |  |
|   |  | Tom Hogistered Agent                                  | 81 N  | 10. Name and Address of New Registered Agent   |  |
| HAMILTON  | I. EVELYN  |   |   |  |  |
| 7368 PALMDALE DR                                  |  | <b>82</b>   St  | 82 Street Address (P.O. Box Number is Not Acceptable) |  |  |
| LANTANA FL 33462-6711                             |  | 83  |   |  |  |
|   |  |   | <b>84</b> Cr  | ofty 85 7th Code   |  |
|   |  |   |   | F  |  |
| <ol> <li>Pursuant to<br/>or registered</li> </ol> | the provisions of Sections 607.0<br>Lagent, or both, in the State of E | 502 and 607,1508, Florida St.                         | itutes, the above name                                | ed corporation submits this statement for the purpose of changing its registered office tion's board of directors. I hereby accept the appointment as registered agent. I am |  |
| familiar with,                                    | and accept the obligations of, S                                       | Section 607.0505, Florida Stati                       | ites.   | stor's board of directors. Friereby accept the appointment as registered agent. I am   |  |
| SIGNATURE   | nature: typed or proted name of registered a                           |   |   |  |  |
| 12.   | ·  | AND DIRECTORS   | [NOTE Bogisteral Agunt sign                           | ADD/TIONS/OHANGES TO OFFICERS AND DIRECTORS IN 12  |  |
| TITLE   | Dopridon   | DELETE  | 1 1717LE  | Change Addition  |  |
| NAME  |  | Han   | 1.2 NAME  |  |  |
| STREET ADDRESS                                    | 7360 20 1000   | 1000  | 1.3 STREET ADDR                                       | DRESS  |  |
| CITY-ST-ZIP                                       | Luntano F  | a. 33762  | 1.4 CITY - ST - ZIP                                   |  |  |
| TITLÉ   | Vice - Precin  | lent DELETE   | 2 1 DILE  | Change Addition  |  |
| NAME  | Ray Hamitto  |   | 2.2 NAME  |  |  |
| STREET ADDRESS                                    | 1368 Palmod  | ile Prine   | 2.3 STREET ADDR                                       | MESS   |  |
| CITY · ST - ZIP                                   | Lantony, F   | 9. 33462  | 2.4 C(TY- \$1-Z(P                                     | Р  |  |
| TITLE<br>NAME                                     | •  | DELETE  | 3 1 TITLE   | ☐ Change ☐ Addition  |  |
| STREET ADDRESS                                    |  |   | 3.2 NAME  |  |  |
| CITY-S1-ZIP                                       |  |   | 33 STREET ADDR  |  |  |
| THILF   |  | DELETE  | 3 4 CHY - ST - ZIP<br>4 1 TITLE                       |  |  |
| NAME  |  |   | 4.2 NAME  | ☐ Change ☐ Addition  |  |
| STREET ADDRESS                                    |  |   | 4 3 STREET ADDR                                       | 2270   |  |
| CITY-ST-ZIP                                       |  |   | 4.4 CITY - ST - ZIP                                   |  |  |
| TITLE   |  | DELETE  | 5 1 TIFLE   | Change Addition  |  |
| NAME  |  |   | 5.2 NAME  |  |  |
| STREET ADDRESS                                    |  |   | 53STREET ADDR   | RESS   |  |
| CITY-S1-ZIP                                       |  |   | 5.4 CFTY - ST - 7:F                                   | ,  |  |
| TITLE   |  | ☐ DELETE  | 6 1 TITLE   | ☐ Change ☐ Addition  |  |
| NAME  |  |   | 6.2 N4ME  |  |  |
| STREET ADDRESS                                    |  |   | 6.3 STREET ADDR                                       | RESS   |  |

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualfy 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 arm 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.

SIGNATURE:

Evelyw Ham: How 3/15/96