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

PROFIT CORPORATION ANNUAL REPORT

1996

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P95000010637 (3)

BARWICK ASSOCIATES, INC.				i iddiindi iku idini okin	<b>40</b> 00 <b>00</b> 00 <b>40</b> 00 0400 140	in <b>zana a</b> nka kiki pran kral
Principal Place of Business		Maling Address				
4540 OAK TREE CT % GERALD GOUCHBERG DELRAY BEACH FL 33445		4540 OAK TREE CT % GERALD GOUCHBERG DELRAY BEACH FL 33445		Date Incorporated or Qualified     3a. Date of Last Report     On 1991		
2. Principal Place	of Rusiness	2a. Mailing Address		02/08/1995 4. FEI Number	L	A F F
21 1355 8.	_	CC 26 640 GLADES	R-AA	65-0584	(202	Applied For Not Applicable
Suite, Apt. #, 6		Suite, Apt. #, etc.	11444	<u> </u>		\$8.75 Additional
22 Ct. 8 State		27 SWITE	314	5. Certificate of Status De		Fee Required
City & State  23 DELLAN	BEACH , FL	28 Boch ATO	N FL	6. Election Campaign Fina Trust Fund Contribution		\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has lia	bility for intangible ta	.,
24 <b>3344</b> (		29 88484	30 USA	Florida Statutes	Yes No	w
	9. Name and Address of Currer	nt Hegistered Agent	81 Name	10. Name and Address o	I New Registered /	Agent
WOLFE, JEROME L 5355 TOWN CENTER ROAD SUITE 902 %ECKERT SEAMAN CHERIN & MELLOTT BOCA RATON FL 33486			82 Street Ack	tress (P.O. Box Number is Not /	Acceptable)	4~1,
11. Pursuant to t	he provisions of Sections 607.0502	and 607.1508, Florida Statutes	s, the above named corpo	pration submits this statement fo	or the purpose of cha	inging its registered office
or registered familiar with,	agent, brooks, to the State of Flori	da. Such change was authorize ion 607:0505, Flörida Statutes.	d by the corporation's boa	ard of directors. Thereby accept	the appointment as	registered agent I am
SIGNATURE					1/30/9	6
12.		rand to Fragilishin (NOT) D DIRECTORS	E. Brigisteren Agrint signature requir  13.	ed when reinstaling. ADDITIONS/CHANGES	DATE TO OFFICE US AND	DIRECTORS IN 10
TITLE P	2 1	☐ DELETE	1 1716	- ADDITIONS OF PARELS		Change Addition
NAME	SEALO GONCHE	146	1.2 NAME		_	7 total
STREET ADDRESS	STO OAK TAEE .	T -	1.3 STREET ADDRESS			
	LLRAY BEACH, M		1.4 C(1) - \$1. Z(P			
TITLE		DELETE	2 1 THLE			Change Addition
NAME			2.2 NAME			
STREET ADDRESS			2.3 STREET ADDRESS			
CITY-ST-ZIP			2.4 CITY - ST - ZIP			
TITLE		□ DELETE	3 1 THULE		[	Change Addition
NAME			3.2 NAME			
STREET ADDRESS			3.3 STEEFT ADDRESS			
CITY - ST - ZIP			3.4 CITY - ST - ZIP			
TITLE		☐ DELETE	4 1 TITLE			Change Addition
NAME			4.2 NAME			
STREET ADDRESS			4.3 STHEET ADDRESS	20000	17909.	d⊃
CITY-ST-ZIP		TT Office	4 4 Cilly - ST - ZiP	20000 	010310	change Addition
THILE		Detete	5 1 HILE	***200.00	J.33. 4	Thange Addition
NAME CTOCCY ADDRESS			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY - ST - ZIP TITLE		DELETE	54 CIT t - S1 - ZIP			Change Addition
NAME			6.2 NAME		<u> </u>	Tought America
STREET ADDRESS			6.3 STREET ADDRESS			CX01/2
CITY - ST - ZIP		^	64 CITY S'-ZP			$Q_{r}^{\prime\prime}$
14. I do hereby o	ertify that the information supplied i	with this filing is coluntarily furnis	hed and does not qualify	for the exemption stated in Sec	tion 119.07(3)(k) Flor	rida Statutes. I further
certify that the oath: that I ar	e information indicated on this annum an officer or director of the corpo ock 12 or Block 13/if changed or o	ual report of supplemental annua arabae or the redeiver on trustee	al report is true and accur enunowered to execute th	ato and that my cionalure chall i	have the capie lead a	official as if productionals

467-637-3007