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PROFIT CORPORATION ANNUAL REPORT

1996



Sandra B Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT # P95000015506 (5)

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Principal Place of Business

1200 NW 13TH-ST., #107E

BOCA RATON FL 33486

Mailing Address

1640 S. CAKE
1200 SW 13TH ST. P107E
BOCA RATON FL 30686

DRIVE 33486



BOCA RATON FL 33486		BOCA RATON FL SORDO 33486					
					3. Date Incorporated or Qualified 02/21/1995	3a. Date of Last R	eport
2. Principal Pla		2a. Mailing Address	44	noice	4. FET Number 65-0564059		Applied For
21 7781	Pines BLVD	26 9640 5.	INKE	VIGIE	65- 6367637	كالمهم إلحي بعد بالمات بالمات المسال	Not Applicable
Suite, Apt. #	, etc.	Suite, Apt. #. etc.			5. Certificate of Status Desired	1 1	Additional Required
City & State 23 PEMBROKE PINES, FL		City & State 28 B.O.C.A R.A	TON,	FL	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip 24 33 0.	Country 25	29 33434	Country 30		8. This corporation has liability for Florida Statutes X Yes	intangible tax under s :	199.032,
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New R	Registered Agent	
			81	Name			
BOGDAN	IOFF, ROBERT J		82	Street Addre	ess (P.O. Box Number is Not Acceptate	ole)	
70 SE 41	TH AVE.						
	BEACH FL 33483		83				
			84	City		FI 85 Zi	p Code
	(0.11.000000	1002 1500 512 513 613			ation submits this statement for the pur		
familiar with	n, and accept the obligations of, Sections of Sections of Sections of acceptance to the section of the section	on 607,050S, Florida Statutes. களம் செருப் அடி (NOIs	Registeries Agen	i signature respire:		DATE	
12.	OFFICERS AND		13.	a series =	ADDITIONS/CHANGES TO OFF		
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CITY - ST - ZIP	BOCA RATON FL 33486		14 CITY - S	1-ZIP /	BOCA RATON, FL	33431	
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certify that the information indicated on this annual report or supplemental annual report is true and accurate another 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.

SIGNATURE:

HIDOUX
SMATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTO

1-29-96 (305)963-9698 5(-3-7-96 Dayne Frame)