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

PROFIT CORPORATION



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham F

	996	Secretary of State DIVISION OF CORPORATIONS						
DOCUM 1. Corporation N	ENT# F	9500002	0395 (6)				
	CENT RESEARCH	. INC.						
Oneoc		,						
Principal Place o	of Business	Mailin	y Address				ille Måtet mutte matt.	
ELOV DIVILLION			33 BAREFOOT T					
ATLANTIC BI	EACH FL 32233	A	rlantic beach i	FL 32233				- (D
						 Date Incorporated or Qualif 03/13/1995 	ed 3a . Dat	e of Last Report
2. Principal Plac	e of Business	2a. M	ailing Address			4. FEI Number 2301	669	Applied For
21		26	ite, Apt. #, etc.					Not Applicable \$8.75 Additional
Suite, Apt. #,	, etc.	27	ш е, Арт. #, е тс.			5. Certificate of Status Desired		Fee Required
City & State		C)	ty & State		44.44 grappy in the second section 24.17.4	6. Election Campaign Financin	9 🗆	\$5.00 May Be Added to Fees
23	Country	28 Z _I		Cou	intry	Trust Fund Contribution 8. This corporation has liability		
Zip 24	25	29	,	30	,,,,,	Florida Statutes	Yes 🔲 No	
		ss of Current Register	ed Agent	,,,,,,		10. Name and Address of N	w Registered	I Agent
81 Name R						ichard G. Hathaway		
SKEELS, ROBERT A 82 Str 444 THIRD STREET						ress (P.O. Box Number is Not Acce Decroped Park	Blud B	ldg 100 Ste 250
	NE-BEACH FL 3220	8			83	•		
					84 City			85 Zip Code 32256
		007.0500	500 Florido Ciat	too the eb		Sphuille ration submits this statement for the	e numose of d	bassias its registered office
11. Pursuant to or registere	o the provisions of Sections agent, or both, in the	State of Florida Such of	aug, rionaa siali janga was authoi os. Clorido Stalid	ized by the	corporation's boa	ration submits this statement for the ird of directors. I hereby accept the	appointment a	is registered agent. I am
SIGNATURE	n, and accept the bulga	(Internal of Section 607.95	os, riolida Statut Maria-7	ua.				1-17-96
, 8	Signature, typied or printed name	of registered agent and tille if appl			J Agent signature reduce	ed when reinstalling) ADDITIONS/CHANGES TO	DATE	
12.	PD	FFICERS AND DIRECTO	DELETE	13. 1.1	TIPLE	ADDITIONS/OFFANGES TO	OFFICE	☐ Change ☐ Addition
NAME	JURGENS, JON	L		1.2 أ	IAME			
STREET ADDRESS	2233 BAREF00			1.3 5	TREET ADDRESS			
CITY-ST-ZIP	ATLANTIC BEAC	CH FL 32233	FT OF FT		CHY-ST-ZIP			Change Addition
TITLE	VD Jurgens, Jon	ATHAN E	DELETE		TITLE			Onlinge Free free free free free free free free
NAME CIDEET ADODESC	2233 BAREFOO	T TRACE			STREET ADDRESS			
STREET ADDRESS CITY-ST-ZIP	ATLANTIC BEA				1			
TITLE	SD		DELETE	3 1	TITLE .	EXECUTIVE UN	é PACS	Change
NAME	JURGENS, ANN				NAME	JURGENS, AM	IN T	-
STREET ADDRESS	2233 BAREFOO ATLANTIC BEA				SZERDCA LEERTS	EXECUTIVE UN JURGENS, AN 2233 DAGE FOR BTLANTIC B	EAUT	FL 37253
CITY-ST-ZIP	T	011 1 1 02200	[] DELETE		CHIY-ST-ZIP TITLE	BI SAN INCH	2014	Change Addition
NAME	JURGENS, JON	!L			NAME			
STREET ADDRESS	2233 BAREFOO	T TRACE		43	STREET ADDRESS			
CITY-ST-ZIP	ATLANTIC BEA	CH FL 32233			CHY-ST-ZIP		3 911	Burge Addition
TITLE			☐ DELFTE		TITLE	000001 -05/14/96	01117	116 L. Addition
NAME					NAME STREET ADDRESS	***200.00	·	
STREET ADDRESS					STREET ADDRESS			
CITY-ST-ZIP TITLE			DELETE		TILE		١	Change Addition
NAME				6.2	NAME		Cli	140
STREET ADDRESS				6.3	STREET ADDRESS		' ('	`` or
CITY, ST. 7IP				6.4	CITY-ST-7IP			

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 corporation or the receiver or trusted empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if chapter 607, or on an attachment with an address. SIGNATURE:

SIGNATURE AND TYPED OR PRIVITE ANAME OF SIGNING OFFICER OR DIRECTOR

CR2E034 (12/95)