## FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Bandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # *P95000029663*1. Corporation Name

## FILED Sep 03 1998 8:00am Secretary of State

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2. Principal Place of Business 21	Principal Place of B	Business	Mailing Address			
2. Principal Pince of Business   2a. Melling Address   2a. Melling Address   2a. Melling Address   2a. Melling Address   2b.						•
2, Principal Place of Business   2a, Meting Address   2   1/137 NW 70 ST   26   1/139 NW 70 ST   27   1/139 NW 70 ST   28   1/139					DO NOT WRITE IN TH	S <b>SPA</b> CE
2.					3. Date Incorporated or Qualified 4/17/1993	
City & Stele   City & Stele   City & Stele   City & Stele					4. FEI Number	Applied For
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City & State  23		G.	_		5. Cortificate of Status Desired	\$8.75 Additional
Added to Fees   Added to Fee	City & State				8 Stontion Compaign Singuistra	
11. Pursuant to the provisions of Socions 607.0502 and 607.1508. Florida Statules, the above-named corporation submits this statement for the purpose of changing its register of agent. I am familiar with, and accept the objection 607.0502 and 607.1508. Florida Statules, the above-named corporation submits this statement for the purpose of changing its register of office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent i am familiar with, and accept the objection 607.0502 and 607.1508. Florida Statules.  SIGNATURE  Spallowe typed to prelief dayort about live 4 subjects to Proince Statules.  In the spallower typed to prelief dayort about live 4 subjects to Proince Statules.  In the spallower typed to prelief dayort about live 4 subjects to Proince Statules.  In the spallower typed to prelief dayort about live 4 subjects to Proince Statules.  In the spallower typed to prelief dayort about live 4 subjects to Proince Statules.  In the spallower typed to prelief dayort about live 4 subjects to Proince Statules.  In the spallower typed to prelief dayort about live 4 subjects to Proince Statules.  In the spallower typed to prelief dayort about live 4 subjects to Proince Statules.  In the spallower typed to prelief agent to the purpose of changing its register agent to prelief agent to prelief agent to prelief agent to the purpose of changing its register.  In the spallower typed to prelief agent to prelief agent agent to the purpose of changing its register agent to prelief agent agent agent to prelief agent agent to prelief agent agent agent to prelief agent	23 NIAM	11 FL		1 FL		
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Foride Statutes, the above-named corporation submits this statement for the purpose of changing its register of agent. I am familiar with, and accept the obligations of Sections 607.0502 and 607.1508. Foride Statutes, the above-named corporation submits this statement for the purpose of changing its register of lice or registered agent, or both, in the State of Floride. Such change was authorized by the corporations submits this statement for the purpose of changing its register of lice or registered agent. I am familiar with, and accept the obligations of Section 607.0502 and 607.1508. Floride Statutes.  Signature from the previsions of Sections 607.0502 and 607.1508. Floride Statutes agent. I am familiar with, and accept the obligations of Section 607.0505. Floride Statutes.  Signature from the previsions of Sections 607.0502 and 607.1508. Floride Statutes agent. I am familiar with, and accept the obligations of Section 607.0505. Floride Statutes.  Signature from the previsions of Sections 607.0502 and 607.1508. Floride Statutes. The expectation submits this statement for the purpose of changing its register of life of the purpose of changing its register of life of the purpose of changing its register.  Signature from previse from the state of Floride Statutes, the appointment as registered agent. The purpose of changing its register of directors. In the purpose of changing its register of directors. In the purpose of changing its register of directors. In the purpose of changing its register of control of directors. In the purpose of changing its register of directors. In the purpose of changing its register of control of the purpose of changing its register of control of the purpose of changing its register of control of the purpose of changing its register of control of the purpose of changing its register of control of the purpose of changing its register of control of the purpose of changing its register of control of the purpose of chang	24 33178	8 25 DADE		30 DAD		
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Size   Address (P.O. Box Number is Not Acceptable)				81 Name	SU. TAI IH	
11. Pursuant to the provisions of Sections 607,0592 and 607,1508, Florida Statutes, the above-hamed corporation submits this statement for the purpose of changing its register of line or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent, or both, in the State of Florida Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent in the applicable.    10.				82 Stree	t Address (P.O. Box Number is Not Acceptable)	
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THE Pursuant to the provisions of Sections 607 0502 and 607 1502, Floride Statules, the above-named corporation submits this statement for the purpose of changing its register of gent I am familiar with and access the obligations of Section 607 0505. Florida sauthorized by the corporation's board of directors. I hereby accept the appointment as registered gent I am familiar with and access the obligations of Section 607 0505. Florida Statules  SIGNATURE    Signature   Delete   Profile   Prof				84 City	00,000	85 Zip Code
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12.		nillar with, and accept the doliga	itions of, Section 607.0505,	riorida Statutes.	2/3	plac
12.	SIGNATURE	lure typed or printed name of registered ager	of and idle if applicable (f	IOTE: Registered Agent signatu	re required when reinstating) DATE	0//0
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4. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information indicated on this annual report of 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 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.

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PHATURE AND THE OR PRINTED WAME OF BIOMING OFFICER OR DIRECTO

8/28/98 (305) 591-993