(06)

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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P95000034798

1. Corporation Name

FILED Feb 10, 1999 8:00 am Secretary of State

02-10-1999 90025 031 ***150.00

THE RO	ASTED PEPPER, INC.	, •					
Principal Blood	of Rusiness	Mailing Address			- I ISBUIRDI IIG ISINI BIIII ĀRIII ADIII SA)
Principal Place of Business Mailing Address 9893 PINES BOULEVARD 9893 PINES BOULEVARD					•		
PEMBROKE PINES FL 33024 PEMBROKE PINES FL 33024			,			•	
T EMPHONE THE					DO NOT WRITE I	N THIS SPACE	
					3. Date Incorporated or Qualifed		
					05/04/1995	<u> </u>	
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number		Applied For
21		26			65-0577908		Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	7	5 Additional
22		27				Fee	Required
City & State City & State		City & State			6. Election Campaign Financing		May Be
23		28			Trust Fund Contribution	Adde	ed to Fees
Zip	Country	Zip	Country	,	8. This corporation owes the current y		□No
24	25		30		Personal Property Tax.	√ (es_	LIND
	9. Name and Address of Curren	t Registered Agent	81	LName	10. Name and Address of New Regis	stered Agent	
V101	HANDRAN TOURNER		01	Name		. ;	
	HANJIAN, JOHN II 3 PINES BOULEVARD		82	Street Addr	ress (P.O. Box Number is Not Acceptable)		
	BROKE PINES FL 33024				2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	<u> </u>	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
PEM	BRUKE PINES FL 33024		83				문행원 [
			84	City		85 Z	ip Code
				- "/		PL	
11. Pursuant office or ragent. I a	to the provisions of Sections 607.050 egistered agent, or both, in the State m familiar with, and accept the obliga	2 and 607.1508, Florida Statute of Florida. Such change was au tions of, Section 607.0505, Flori	s, the above thorized by ida Statutes	e-named corp the corporation	poration submits this statement for the purpon's board of directors. I hereby accept the	oose of changing e appointment as	its registered registered
agent. I a SIGNATURE	m familiar with, and accept the obligation of segmentary typed or printed name of registered age.	nt and title if applicable. (NOTE:	Registered Age	.	ed when reinstating)	DATE	
agent. 1 a SIGNATURE 12.	m familiar with, and accept the obligation of registered age OFFICERS AN	itions or, Section 607.0303, Flori	ida Statutes	.		DATE	TORS IN 12
agent. 1 a SIGNATURE 12. TITLE	M familiar with, and accept the obligation of signature, typed or printed name of registered age OFFICERS AN	nt and title if applicable. (NOTE:	Registered Agei 13. 1.1 TITLE	.	ed when reinstating)	DATE ERS AND DIREC	TORS IN 12
agent. 1 a SIGNATURE 12. TITLE NAME	m familiar with, and accept the obligation of registered age OFFICERS AN PD KULHANJIAN, JOHN II	nt and title if applicable. (NOTE:	Registered Age 13. 1.1 TITLE 1.2 NAME	nt signature require	ed when reinstating)	DATE ERS AND DIREC	TORS IN 12
agent. 1 a SIGNATURE 12. TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered age OFFICERS AN PD KULHANJIAN, JOHN II 9893 PINES BOULEVARD	nt and title if applicable. (NOTE:	Registered Ager 13. 1.1 TITLE 1.2 NAME 1.3 STREE	nt signature require	ed when reinstating)	DATE ERS AND DIREC	TORS IN 12
agent. 1 a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered age OFFICERS AN PD KULHANJIAN, JOHN II 9893 PINES BOULEVARD PEMBROKE PINES FL 33024	nt and title if applicable. (NOTE:	Registered Ager 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S	nt signature require	ed when reinstating)	DATE ERS AND DIREC	TORS IN 12 je Addition
agent. 1 a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE	Signature, typed or printed name of registered age OFFICERS AN PD KULHANJIAN, JOHN II 9893 PINES BOULEVARD PEMBROKE PINES FL 33024 SD	nt and title if applicable. (NOTE: ID DIRECTORS DELETE	Registered Agel 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE	nt signature require	ed when reinstating)	DATE ERS AND DIREC ☐ Chang	TORS IN 12 pe Addition
agent. 1 a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered age OFFICERS AN PD KULHANJIAN, JOHN II 9893 PINES BOULEVARD PEMBROKE PINES FL 33024 SD KULHANJIAN, ARA	nt and title if applicable. (NOTE: ID DIRECTORS DELETE	Registered Aget 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME	nt signature require	ed when reinstating)	DATE ERS AND DIREC ☐ Chang	TORS IN 12 pe Addition
agent. 1 a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered age OFFICERS AN PD KULHANJIAN, JOHN II 9893 PINES BOULEVARD PEMBROKE PINES FL 33024 SD KULHANJIAN, ARA 9893 PINES BOULEVARD	nt and title if applicable. (NOTE: ID DIRECTORS DELETE	Registered Ager 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE	nt signature require T ADORESS ST-ZIP	ed when reinstating)	DATE ERS AND DIREC ☐ Chang	TORS IN 12 pe Addition
agent. 1 a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered age OFFICERS AN PD KULHANJIAN, JOHN II 9893 PINES BOULEVARD PEMBROKE PINES FL 33024 SD KULHANJIAN, ARA 9893 PINES BOULEVARD PEMBROKE PINES FL 33024	Itloris of, Section 607,0905, Fight Int and title if applicable. (NOTE: ND DIRECTORS DELETE	Registered Ager 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S	nt signature require T ADORESS ST-ZIP	ed when reinstating)	DATE ERS AND DIREC ☐ Chang	TORS IN 12 ge Addition ge Addition
agent. 1 a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered age OFFICERS AN PD KULHANJIAN, JOHN II 9893 PINES BOULEVARD PEMBROKE PINES FL 33024 SD KULHANJIAN, ARA 9893 PINES BOULEVARD PEMBROKE PINES FL 33024 TD	nt and title if applicable. (NOTE: ID DIRECTORS DELETE	Registered Ager 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE	nt signature require T ADORESS ST-ZIP	ed when reinstating)	DATE ERS AND DIREC Chang	TORS IN 12 ge Addition ge Addition
agent. 1 a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered age OFFICERS AN PD KULHANJIAN, JOHN II 9893 PINES BOULEVARD PEMBROKE PINES FL 33024 SD KULHANJIAN, ARA 9893 PINES BOULEVARD PEMBROKE PINES FL 33024 TD DIPIAZZA, ANGELO	Itloris of, Section 607,0905, Fight Int and title if applicable. (NOTE: ND DIRECTORS DELETE	Registered Ager 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME	nt signature require T ADORESS ST-ZIP T ADDRESS ST-ZIP	ed when reinstating)	DATE ERS AND DIREC Chang	TORS IN 12 ge Addition ge Addition
agent. 1 a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered age OFFICERS AN PD KULHANJIAN, JOHN II 9893 PINES BOULEVARD PEMBROKE PINES FL 33024 SD KULHANJIAN, ARA 9893 PINES BOULEVARD PEMBROKE PINES FL 33024 TD DIPIAZZA, ANGELO 9893 PINES BOULEVARD	Itloris of, Section 607,0905, Fight Int and title if applicable. (NOTE: ND DIRECTORS DELETE	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE	nt signature require IT ADORESS ST-ZIP IT ADDRESS ST-ZIP	ed when reinstating)	DATE ERS AND DIREC Chang	TORS IN 12 ge Addition ge Addition
agent. 1 a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME STREET ADDRESS CITY- ST- ZIP STREET ADDRESS CITY- ST- ZIP	Signature, typed or printed name of registered age OFFICERS AN PD KULHANJIAN, JOHN II 9893 PINES BOULEVARD PEMBROKE PINES FL 33024 SD KULHANJIAN, ARA 9893 PINES BOULEVARD PEMBROKE PINES FL 33024 TD DIPIAZZA, ANGELO 9893 PINES BOULEVARD PEMBROKE PINES FL 33024 PEMBROKE PINES FL 33024	nt and (title if applicable. (NOTE: ND DIRECTORS DELETE DELETE	Registered Ager 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY-S 3.4 CITY-S	nt signature require IT ADORESS ST-ZIP IT ADDRESS ST-ZIP	ed when reinstating)	DATE ERS AND DIREC Chang	TORS IN 12 ge
agent. 1 a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE TITLE TITLE TITLE	Signature, typed or printed name of registered age OFFICERS AN PD KULHANJIAN, JOHN II 9893 PINES BOULEVARD PEMBROKE PINES FL 33024 SD KULHANJIAN, ARA 9893 PINES BOULEVARD PEMBROKE PINES FL 33024 TD DIPIAZZA, ANGELO 9893 PINES BOULEVARD PEMBROKE PINES FL 33024 VD	Itloris of, Section 607,0905, Fight Int and title if applicable. (NOTE: ND DIRECTORS DELETE	Registered Ager 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY-S 4.1 TITLE	nt signature require IT ADDRESS ST-ZIP IT ADDRESS ST-ZIP IT ADDRESS ST-ZIP	id when reinstating)	DATE ERS AND DIRECT Change Change	TORS IN 12 ge
agent. 1 a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME STREET ADDRESS CITY- ST- ZIP TITLE NAME	Signature, typed or printed name of registered age OFFICERS AN PD KULHANJIAN, JOHN II 9893 PINES BOULEVARD PEMBROKE PINES FL 33024 SD KULHANJIAN, ARA 9893 PINES BOULEVARD PEMBROKE PINES FL 33024 TD DIPIAZZA, ANGELO 9893 PINES BOULEVARD PEMBROKE PINES FL 33024 VD KEVORKIAN, JOHNNY Y	nt and (title if applicable. (NOTE: ND DIRECTORS DELETE DELETE	Registered Ager 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY-S 4.1 TITLE 4. 2 NAME	nt signature require IT ADDRESS ST-ZIP IT ADDRESS ST-ZIP IT ADDRESS ST-ZIP	id when reinstating)	DATE ERS AND DIRECT Change Change	TORS IN 12 ge
AGENTURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	Signature, typed or printed name of registered age OFFICERS AN PD KULHANJIAN, JOHN II 9893 PINES BOULEVARD PEMBROKE PINES FL 33024 SD KULHANJIAN, ARA 9893 PINES BOULEVARD PEMBROKE PINES FL 33024 TD DIPIAZZA, ANGELO 9893 PINES BOULEVARD PEMBROKE PINES FL 33024 VD KEVORKIAN, JOHNNY Y 9893 PINES BOULEVARD	nt and (title if applicable. (NOTE: ND DIRECTORS DELETE DELETE	Registered Ages 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 4.1 TITLE 4.2 NAME 4.3 STREE 4.2 NAME 4.3 STREE	nt signature require T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP	id when reinstating)	DATE ERS AND DIRECT Change Change	TORS IN 12 ge
agent. 1 a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered age OFFICERS AN PD KULHANJIAN, JOHN II 9893 PINES BOULEVARD PEMBROKE PINES FL 33024 SD KULHANJIAN, ARA 9893 PINES BOULEVARD PEMBROKE PINES FL 33024 TD DIPIAZZA, ANGELO 9893 PINES BOULEVARD PEMBROKE PINES FL 33024 VD KEVORKIAN, JOHNNY Y 9893 PINES BOULEVARD PEMBROKE PINES FL 33024 VD KEVORKIAN, JOHNNY Y 9893 PINES BOULEVARD PEMBROKE PINES FL 33024	Int and title if applicable. (NOTE: ND DIRECTORS DELETE DELETE DELETE	Registered Agei 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 4.1 TITLE 4.2 NAME 4.3 STREE 4.4 CITY-S	nt signature require T ADDRESS ST-ZIP T ADDRESS ST-ZIP T ADDRESS ST-ZIP	id when reinstating)	DATE ERS AND DIRECT Change Change	TORS IN 12 ge
AGENTURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	Signature, typed or printed name of registered age OFFICERS AN PD KULHANJIAN, JOHN II 9893 PINES BOULEVARD PEMBROKE PINES FL 33024 SD KULHANJIAN, ARA 9893 PINES BOULEVARD PEMBROKE PINES FL 33024 TD DIPIAZZA, ANGELO 9893 PINES BOULEVARD PEMBROKE PINES FL 33024 VD KEVORKIAN, JOHNNY Y 9893 PINES BOULEVARD PEMBROKE PINES FL 33024 VD PEMBROKE PINES FL 33024 VD	nt and (title if applicable. (NOTE: ND DIRECTORS DELETE DELETE	Registered Ages 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 4.1 TITLE 4.2 NAME 4.3 STREE 4.2 NAME 4.3 STREE	nt signature require T ADORESS ST-ZIP ET ADORESS ST-ZIP ET ADORESS ST-ZIP ET ADORESS ST-ZIP	id when reinstating)	Chang	TORS IN 12 ge
agent. 1 a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	Signature, typed or printed name of registered age OFFICERS AN PD KULHANJIAN, JOHN II 9893 PINES BOULEVARD PEMBROKE PINES FL 33024 SD KULHANJIAN, ARA 9893 PINES BOULEVARD PEMBROKE PINES FL 33024 TD DIPIAZZA, ANGELO 9893 PINES BOULEVARD PEMBROKE PINES FL 33024 VD KEVORKIAN, JOHNNY Y 9893 PINES BOULEVARD PEMBROKE PINES FL 33024 VD CASTIGLIONE, FRANK	Int and title if applicable. (NOTE: ND DIRECTORS DELETE DELETE DELETE	Registered Ages 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 4.1 TITLE 4.2 NAME 4.3 STREE 4.2 NAME 4.3 STREE 4.4 CITY-S 5.1 TITLE 5.2 NAME	nt signature require T ADORESS ST-ZIP ET ADORESS ST-ZIP ET ADORESS ST-ZIP ET ADORESS ST-ZIP	id when reinstating)	Chang	TORS IN 12 ge
agent. 1 a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	SIgnature, typed or printed name of registered age OFFICERS AN PD KULHANJIAN, JOHN II 9893 PINES BOULEVARD PEMBROKE PINES FL 33024 SD KULHANJIAN, ARA 9893 PINES BOULEVARD PEMBROKE PINES FL 33024 TD DIPIAZZA, ANGELO 9893 PINES BOULEVARD PEMBROKE PINES FL 33024 VD KEVORKIAN, JOHNNY Y 9893 PINES BOULEVARD PEMBROKE PINES FL 33024 VD CASTIGLIONE, FRANK 9893 PINES BOULEVARD	Int and title if applicable. (NOTE: ND DIRECTORS DELETE DELETE DELETE	Registered Ages 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 4.1 TITLE 4.2 NAME 4.3 STREE 4.5 NAME 5.5 TITLE 5.2 NAME 5.3 STREE	nt signature require IT ADDRESS ST-ZIP	id when reinstating)	Chang	TORS IN 12 ge
agent. 1 a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered age OFFICERS AN PD KULHANJIAN, JOHN II 9893 PINES BOULEVARD PEMBROKE PINES FL 33024 SD KULHANJIAN, ARA 9893 PINES BOULEVARD PEMBROKE PINES FL 33024 TD DIPIAZZA, ANGELO 9893 PINES BOULEVARD PEMBROKE PINES FL 33024 VD KEVORKIAN, JOHNNY Y 9893 PINES BOULEVARD PEMBROKE PINES FL 33024 VD CASTIGLIONE, FRANK	Itions of, Section 607,0005, First Int and title if applicable. (NOTE: ND DIRECTORS DELETE DELETE DELETE	Registered Ages 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 4.1 TITLE 4.2 NAME 4.3 STREE 4.2 NAME 4.3 STREE 4.4 CITY-S 5.1 TITLE 5.2 NAME	nt signature require IT ADDRESS ST-ZIP IT ADDRESS ST-ZIP	id when reinstating)	Chang	TORS IN 12 ge Addition ge Addition ge Addition ge Addition
agent. 1 a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME	SIgnature, typed or printed name of registered age OFFICERS AN PD KULHANJIAN, JOHN II 9893 PINES BOULEVARD PEMBROKE PINES FL 33024 SD KULHANJIAN, ARA 9893 PINES BOULEVARD PEMBROKE PINES FL 33024 TD DIPIAZZA, ANGELO 9893 PINES BOULEVARD PEMBROKE PINES FL 33024 VD KEVORKIAN, JOHNNY Y 9893 PINES BOULEVARD PEMBROKE PINES FL 33024 VD CASTIGLIONE, FRANK 9893 PINES BOULEVARD	Int and title if applicable. (NOTE: ND DIRECTORS DELETE DELETE DELETE	Registered Age 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 4.1 TITLE 4.2 NAME 4.3 STREE 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY-S 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY-S	nt signature require T ADDRESS ST-ZIP	id when reinstating)	Chang	TORS IN 12 ge Addition ge Addition ge Addition ge Addition
agent. 1 a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Signature, typed or printed name of registered age OFFICERS AN PD KULHANJIAN, JOHN II 9893 PINES BOULEVARD PEMBROKE PINES FL 33024 SD KULHANJIAN, ARA 9893 PINES BOULEVARD PEMBROKE PINES FL 33024 TD DIPIAZZA, ANGELO 9893 PINES BOULEVARD PEMBROKE PINES FL 33024 VD KEVORKIAN, JOHNNY Y 9893 PINES BOULEVARD PEMBROKE PINES FL 33024 VD CASTIGLIONE, FRANK 9893 PINES BOULEVARD PEMBROKE PINES FL 33024 VD CASTIGLIONE, FRANK 9893 PINES BOULEVARD PEMBROKE PINES FL 33024	Itions of, Section 607,0005, First Int and title if applicable. (NOTE: ND DIRECTORS DELETE DELETE DELETE	Registered Ages 13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-S 2.1 TITLE 2.2 NAME 2.3 STREE 2.4 CITY-S 3.1 TITLE 3.2 NAME 3.3 STREE 3.4 CITY-S 4.1 TITLE 4.2 NAME 4.3 STREE 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY-S 6.1 TITLE 6.2 NAME	nt signature require T ADDRESS ST-ZIP	id when reinstating)	Chang	TORS IN 12 ge Addition ge Addition ge Addition ge Addition

14. 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 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 of 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 attacpment with an address with all other like empowered.

SIGNATURE: SIGNATURE: SIGNATURE AND TYPED OR KINTEPNAME OFFICER OR DIRECTOR DIRECTOR DATE DAYLING OFFICER OR DIRECTOR