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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

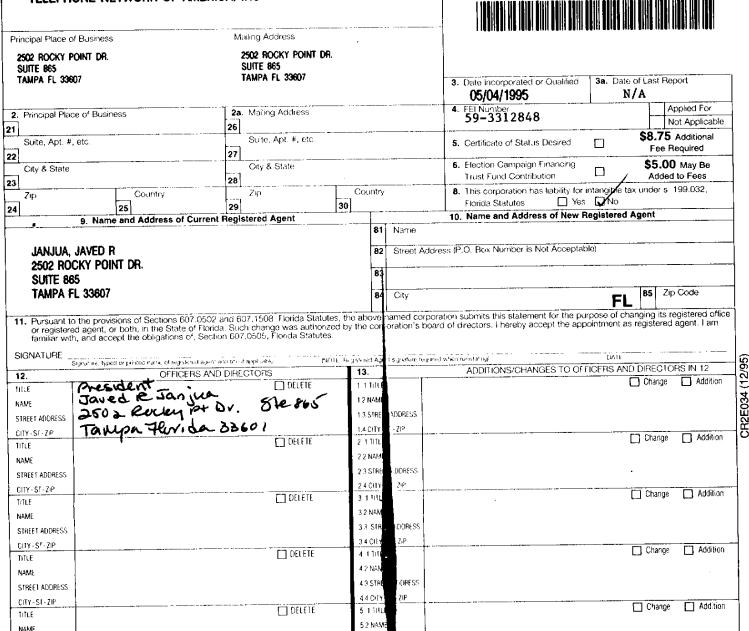
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DIVISION OF CORPORATIONS

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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 path; that I am an officer or director of the corporation or the proviser 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 a on an attention with an address. ZIP

53 STREE

5.4 CITY -

6 1 TITLE

6.2 NAME

63 STREE

**XDRESS** 

TORESS

Javed R. Janjua

ZIP

SIGNATURE:

STREET ADDRESS

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CITY-ST-ZIP

TITLE

NAME

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