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

 PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

DOCUN 1. Corporation	MENT # P950	00037342 (9 INC.))		
Principal Place of Business 1 FINANCIAL PLAZA FORT LAUDERDALE FL 33394		Mailing Address 1 Financial Plaza Fort Lauderdale Fl 33394			88469 MAN 18889 MIN 81818 MEN 11&1
				3. Date Incorporated or Qualified 34 05/11/1995	a. Date of Last Report
2. Principal Pla	ice of Business	2a. Maling Address		4. FEI Number	Applied For
Suite, Apt. #	t, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	Not Applicable \$8.75 Additional
City & State		City & State		6. Election Campaign Financing	Fee Required \$5.00 May Be
23 Zip	Country	28	Country	Trust Fund Contribution 8. This corporation has liability for intan	Added to Fees
24	9. Name and Address of Cur	29 rent Registered Agent	[30]	8. This corporation has liability for intan Florida Statutes Yes 10, Name and Address of New Regis	
		· ··· · · · · · · · · · · · · · · · ·	81 Name		Na Page 1
BASSETT, DAVID 1 FINANCIAL PLAZA			82 Street Add	ddress (P.O. Box Number is Not Acceptable)	
	AUDERDALE FL 33394		83		
•			84 City	1-11-11-11-11-11-11-11-11-11-11-11-11-1	FL 85 Zip Code
SIGNATURE _	n, and accept the obligations of, S Spratus typed or probylate or registers a OFFICERS	ection 507,6505, Florida Statutes entend therrapy was in the Statutes AND DIRECTORS	tte Poj-trog Ajera signat zo reque	and of directors. Thereby accept the appointment of directors. Thereby accept the appointment of directors. ADDITIONS CHANGES TO OFFICE (DATE IS AND DIRECTORS IN 12
TIFLE NAME 1	PRESIDENT	□ DELETE	1 1 TITLE 12 NAME		Change Addition
STREET ADDRESS	916 POLK S	ASSETT	1.3 STREET ADORESS		
City-St-ZiP Title	HALL PLANCED	FL: 33019	14 CITY - \$1 - ZIP		
NAME	SEC-TREAM	SIRER DRIFTE LIBASSET	2 1 THUE 22 NAME		Change Addition
STREET ADDRESS	916 POLKS	CI Brissel	2.3 STREET ADDRESS		
CITY-ST-ZIP	916 POLK ST	FL 33019	24 CHY-SE ZP 3 1 TILE		Change Addition
NAME		Level 1	3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CITY - ST - ZIP TITLE		DELETE	3 4 CHY - ST - Z-P 4 1 TITLE	400	Change Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDIRESS		
CITY-SI-ZIP TITLE		DELE TE	4.4.0 TY-ST-ZIP 5.1 TYLE		Change Addition
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY+ST-ZIP TITLE	·	☐ DELETE	5 4 O(TY - ST - Z(P) 6 1 T(TLE		Change Addition
NAME		Meere	6.2 NAME		C Outside C Vanitali
STREET ADDRESS			6 3 STREET ADDRESS		
CITY-S1-ZIF	- 16 Ab - 1 V		€ 4 CITY ST-ZIP		
certify that oath; that h	y certify that the information supplied to information indicated on this as am an officer or director of the co- Block 12 or Block 13 inchanged, or Block 12 or Block 13 inchanged, or Block 12 or Block 13 inchanged, or Block 1	nnual report or supplemental ann rporation or the receiver of rusta	ual∡eport is true and accur	for the exemption stated in Section 119.07(3 ate and that my signature shall have the sam is report as required by Chapter 607, Florida	e legal effect as if made under
SIGNAT	URE: SIGNATURE AND TYPE	OF PRINTED NAME OF SIGNING OFFICE	AUSOCA	7/23/96	Bristone Priorie •