PROFIT CORPORATION ANNUAL REPORT 1996	Sandra Secrete	S \$225.00- RTMENT OF STATE B. Mortham ary of State CORPORATIONS	APPROV AND FILED 1996 NOV -6 F	)
Principal Place of Business  185 NW Spenish River	Mailing Address	PNC.	SECRETARY OF TALLAHASSEE.	F STATE FLORIDA
Ste. 255 Book Puston, F1 3343	~ .	on, 41 3343/	3. Date Incorporated or Qualified	3a. Date of Last Report
2- Principal Place of Business	2a. Mailing Address		4. FEI Number	Applied For
21	26		16-1318018	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	City & State		6. Election Campaign Financing	Г) <b>\$5.00</b> Мау Ве
Zip Country	28 Z <sub>I</sub> p	Country	Trust Fund Contribution  8. This corporation has liability for in	Added to Fees
24 25	29	30	Florida Statutes  Yes	
	Current Registered Agent		10. Name and Address of New Re	
Q4 1 C		81 Name		
Roth, Gooffney	$\mathcal{D}'$	82 Street Addre	ss (P.O. Box Number is Not Acceptable	9)
185 NW spanish	River Blud. Ste Z	SS 83		
8 . 5 1		30  83		
Boca Raton, FI	35431	84 City		FL 85 Zip Code
Pursuant to the provisions of Sections 60 or registered agent, or both, in the State familiar with, and accept the obligation of SIGNATURE	7.0502 and 607.1508, Florida Statuter Millorida Such change was authorize Millorida Statutes. Millorida Statutes.	s, the above named corpora d by the corporation's board	tion submits this statement for the purp of directors. I hereby accept the appoi	ose of changing its registered office infraent as registered agent. I am
Signature, typeds crinted name of re-		: Registered Apont signature required		OVE
12. GROTHIEW WIFICE	RS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	
	<u> </u>	1. 1 TITLE 1.2 NAME		Change Addition
STREET ADDRESS Z 667 N. OCC	ren V. Jr.	1.3 STREET ADDRESS		
CITY-ST-ZIP BOOM Res Trans.	EI #84 81	1.4 CITY-SI-ZIP		
TITLE VSD	DELETE	2. 1 TITLE		Change Addition
NAME Bouck, William	u H	2.2 NAME		, - <del>"</del> ,
STREET ADDRESS Fox have		2 3 STREET ADDRESS	e die	SAN TO SAN THE
CITY-ST-ZIP Cazenovia	NY (3035	2.4 CITY - ST - ZIP		
THE STATE OF THE S	. Detert	3. 1 TITLE		Change Addition
STREET ADDRESS	1 P. ver 540 255	3.2 NAME 3.3. STREET ADDRESS		
CITY-ST-ZIP Box Ratos F	ey D. h River, the 266 1/ 33431	3.4 CITY - ST - ZIP		
TITLE	DELETE	4. 1 TITLE		☐ Change ☐ Addition
NAME		4.2 NAME	7000020	051671
STREET ADDRESS		4.3 STREET ADDRESS	-11/14/9	9601107002
CITY-ST-ZIP		4.4 CITY-ST-ZIP	*****6]	1.25 *****61.25
TITLE NAME .	☐ DELETE	5. 1 TITLE		☐ Change ☐ Addition
NAME  STREET ADDRESS		52 NAME		
SILICE LANGUESS		5 3 STREET ADDRESS		

Addition 6.4 CITY-ST-ZIP

14. 1 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 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 chapted, or on an intermediate that my name appears in Block 12 or Block 13 if chapted in 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 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 or suppl

5.4 CITY - ST - ZIP

6.3 STREET ADDRESS

6 1 THILE

6.2 NAME

DELETE

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

561 760 1835

☐ Change