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**PROFIT** CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # 1. Corporation Name

P95000041959 (4)

CUMMINGS BRACE, INC.



						JJ BBBIA BBIAR BIBBI HBIB I	
Principal Place o	of Business	Mailing Address					
8490 S.R. 84		1625 TAFT ST.	2000 2016		ļ		
DAVIE FL 33	3324	HOLLYWOOD FL 33	3020-3215		3. Date incorporated or Qualified 05/24/1995	3a. Date of Last	Report
2. Principal Plac	ce of Business	2a. Mailing Address			4. FEI Number		Applied For
		26			65-05910-11		Not Applicable
Suite, Apt. #	, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	T -	5 Additional Required
City & State		City & State			Election Campaign Financing     Trust Fund Contribution		00 May Be ed to Fees
Zip	Country	Zip	Coun	itry	8. This corporation has liability for	intangible tax under	s 199.032,
4]	25	29	30	•	Florida Statutes	□ No	
<u> </u>	9. Name and Address of Current				10. Name and Address of New F	legistered Agent	
				81 Name			
	BA, JOHN J		82 Street Add		ddress (P.O. Box Number is Not Acceptable)		
1625 TAFT ST. HOLLYWOOD FL 33020-3215			8:				
HOLLY	WOOD 1 E 03020 0210		}	84 City		FL 85	Zip Code
or rogistors	o the provisions of Sections 607.0502 and agent, or both, in the State of Floridah, and accept the obligations of, Section	a Such change was autho	יט פווו ער טעטווו	re-named co orporation's l	rporation submits this statement for the publicated of directors. I hereby accept the app	rpose of changing its ointment as register	ed agent. I am
SIGNATURE				Basel classifier to	equired when reinstating?	DATE	
,	Signature, typed or printed name of registered agent a	and fite if populable					
	*			Agent agnature re	ADDITIONS/CHANGES TO OFF	ICERS AND DIRECT	FORS IN 12
12.	OFFICERS AND	DIRECTORS	13.		ADDITIONS/CHANGES TO OFF	ICERS AND DIRECT	
<b>12.</b> TIILE	OFFICERS AND			TLE	ADDITIONS/CHANGES TO OFF		
12. TILE NAMÉ	OFFICERS AND D CUMMINGS, CHRIS	DIRECTORS	13. 1.1 TH 1.2 NA	TLE	ADDITIONS/CHANGES TO OFF	K Changi	e 🔲 Addition
12. TITLE NAMÉ STREET ADDRESS	OFFICERS AND D CUMMINGS, CHRIS 1625 TAFT ST.	DIRECTORS  DELETE	13. 1.1 TH 1.2 NA 1.3 STI	TLE ME REET ADDRESS	ADDITIONS/CHANGES TO OFF	K Changi	e 🔲 Addition
TILE NAME STREET ADDRESS GITY - ST - ZIP	D CUMMINGS, CHRIS 1625 TAFT ST. HOLLYWOOD FL 33020-321	DIRECTORS  DELETE   DELETE	13. 1.1 TH 1.2 NA 1.3 STI	TLE Me Reet address TY-ST-ZIP	ADDITIONS/CHANGES TO OFF	K Changi	e 🔲 Addition
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2.  IIILE  IAME STREET ADDRESS  DITY-ST-ZIP  IILE  VAME STREET ADDRESS	D CUMMINGS, CHRIS 1625 TAFT ST. HOLLYWOOD FL 33020-321 D CUMMINGS, KEY D 8490 S.R. 84	DIRECTORS  DELETE  DELETE	13. 1.1 Ti 1.2 NA 1.3 STI 1.4 CII 2.1 Ti 2.2 NA 2.3 ST	TLE ME REET ADDRESS TY-ST-ZIP TLE ME	ADDITIONS/CHANGES TO OFF 8490 S.R. 84 FT. LAUPERDALL P	<b>K</b> Changi F∠ 3.5 ☐ Changi	e Addition
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I on nereby certify that the information supplied with this lightly supplied with the certify that the information indicated of 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 16 if charged, or on an attachment with an address.

SIGNATURE:

ENATURE AND TYPED OR PRINTED NAME OF JIGNING