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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

1996

DIVISION OF CORPORATIONS

1. Corporation		# P9500 :s of south f	OO43263 FLORIDA, INC.	(9)				663 NATA 114		
Principal Place	of Business		Mailing Address	Mailing Address				ADD CALLS HE	TE OMOG MI 1881	
3449 N.W. 55TH STREET FT. LAUDERDALE FL 33309			3449 N.W. 55TH STREET FT. LAUDERDALE FL 33309							
							3. Date Incorporated or Qualified 3a. Date 06/06/1995	of Last R	eport	
2. Principa! Place of Business			2a. Mailing Address 26				4. FE! Number 65-0585274	Applied For Not Applicable		
Suite, Apt.	·		27				5. Certificate of Status Desired	• •	Additional Required	
City & State			City & State	28			6. Election Campaign Financing Trust Fund Contribution	Adde	May Be d to Fees	
Zip 24	25		Zip [29]	30 Coun	Country		8. This corporation has liability for intangible tax under s 199.032, Florida Statutes Yes No			
·	9, Name ar	o Address of Curre	nt Registered Agent		31	Name	10. Name and Address of New Registered	Agent		
SIMPSON, M J					32	Street Ac	ddress (P.O. Box Number is Not Acceptable)			
3449 N.W. 55TH ST. FT. LAUDERDALE FL 33309					33			·		
11.040	OLDIONUL TE	. 33309			34	City		T1 '-		
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the						,	FL		p Code	
familiar wit	ed agent, or bo th, and accept t	th, in the State of Flor the obligations of, Sec rinted name of registered agen	nda. Such change was au stion 607.0505, Florida Sta	thorized by the co atutes. (NOTE: Registered A	rpc	ration's be	oard of directors. Thereby accept the appointment as	registered	agent. I am	
TITLE	D	OF FIGURE AN	DELETE	13.	F		ADDITIONS/CHANGES TO OFFICERS AND	Change	Addition	
NAME	SIMPSON	, M J		1.2 NAN			•			
STREET ADDRESS		. 55TH ST.		1.3 STRE		ADDRESS :				
CITY-ST-ZIP		erdale fl 33309			1.4 CITY - ST - ZIP					
TITLE	D D		☐ DELETE		2.1 TiTLE		•	X Change	☐ Addition	
NAME STREET ADDRESS	FRY, JIM 3449 N.W. 55TH ST.			2.2 NAME			James J. Fry			
CITY-ST-ZIP		ERDALE FL 33309			2 3 STREET ADDRESS 2 4 CITY-ST-ZIP		3449 N.W. 55th Street			
TITLE	D		□ DELETE		3 1 TITLE		Ft. Lauderdale, FL 33309	Change	Addition	
NAME	PENASSO	, ALEXANDER		3.2 NAM			•			
STREET ADDRESS	3449 N.W	. 55TH ST.		3.3 STR	EET.	ADDRESS				
CITY-ST-ZIP	FT. LAUD	ERDALE FL 33309		3.4 CITY	- ST	- ZIP				
THTLE				4. 1 7(1)	4. 1 TITLE		[Change	☐ Addition	
NAME				4.2 NAM	E					
STREET ADDRESS						ADDRESS				
CITY-ST-ZIP TITLE			DELETE	4.4 CITY		- ZIP	r	T Change	☐ Addition	
NAME				5 1 TITL 5 2 NAM			L	_ Change	☐ Addition	
STREET ADDRESS						NDDRESS				
CITY-SI-ZIF				5.4 CITY						
TITLE			DELETE			 "	F	Change	Addition	
NAME				62 NAM	E		•	- •	_	
STREET ADDRESS				63 STRI	ET#	ADDRESS				
CITY-S1-2IP				6.4 C/TY	- ST	- 7IP				

14. I do hereby certify that the information supplied with this firing 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 chapter, or on apputtachment with an address.

OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

4/23/96 954-733-9980 Date Destine Prone *