	PLEASE PLICATION FOR/1//// STATEMENT	READ A	FLORIDA		RTMEN 3. Mor	NT OF STATE tham		ING THIS FO	ORM. I-ROVED AND FILED		
				VISION OF	CORPOR	RATIONS	_	YAH RP	-8 AM 8:	25	
DOCUMENT # P95000045124 1. Corporation Name FLORIDA MAYA CORPORATION								-			
							SECRETARY OF STATE TALLAMASSEE, FLORIDA				
261 A1	ace of Business ternate 19, Sui larbor, FL 3468		Mailing Addre	ess							
	ddresses are incorrect in any										
2721 Gulf Boulevard 2721 Gu				ng Office Address, If Applicable			Date Incorporated or Qualified To Do Business in Florida 06/06/95				
Suite, Apt. #, etc, Suite, Apt. #,				etc.			5. FEI Number			Applied For	
City & State Indian	Rocks Bch., FL		City & State Indian	Rocks			59-33	18326		Not Applicable	
Zip #33785	Country		_{Zip} 33785		Country			OF STATUS DESIRED		ional Fee require ilicate of Status	
7. Names a	and Street Addresses of Each		Director (Flor	rida nonprof							
Title(s) 1	Name of Officers and/or Directors 2			Street Address of Each Officer and/or Director 3 (Do NOT Use Post Office Box N				4	City / State / Zip		
DP	AOUCHICHE, BRAHAM				2%21 Gulf Boulevard			Indian Roc	ks Beach,	FL 3378	
VPST AOUCHICHE, NADIA			2721 Gulf Boulevard				 Indian Roc	ks Beach,	FL 3378		
						90	100025	24509	-1 4		
								-05/14/9	9 0 -01123).00 ***	027	
-							90	00025 -05/14/9	24509 3801123	94 028	
.							90	000088	.00 **** 2450\$		
8. Name and Address of Current Registered Agent							9. Name and A	ddress of Naw Rep	istered Agenta:	<u>029</u> 029	
LABRECQUE, EDWARD C. Robert R											
261 Alternate 19, Suite B Palm Harbor, FL 34683 US								is Not Acceptable) 19 South	,,		
. a.m. naredig it 07000 00				Suite, Apt. #, Etc.			90	000025		3	
					ļ	City Tarpon	Snringe '	****250		-ນວນ ຊຽ 0.00	
10. I, being	appointed the registered ager	nt of the above	named corpor	ation, am fa	ımiliar wit			on 607.0505, F.S.	FL 940	09	
Signature of Registered /	Agent Robert Ronde	None	CON STERED AGE	ENT MUST !	SIGN		9 0	1616161225 16161612459 16161616125 161616125 161616125 161616125 161616125 161616125 161616125 161616125 161616125 161616125 161616125 161616125 161616125 161616125 161616125 161616125 161616125 161616 161		34 031 **8.75	
11. This corporation owes or has paid the current year Intangible Personal Property tax due June 30.								No X (See other side for information on intangible tax.)			
12. I certify this reins	that I am an officer or director statement application, the reas	or the receive son for dissolu	or trustee em	powered to eliminated, t	execute the corpor	his application as pr ate name satisfies t	rovided for in chap the requirements	pter 607 or 617, F.S. of section 607.0401 o	I further certify that or 617.0401, F.S.,	at when filing that all fees	

owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath. Braham Aouchiche SIGNATURE AND TYPES OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

The same of the sa

5-6-98 (813)594-7323 Date Daytime Phone #