|  | PROFIT  | FEE AFTER   | R MAY 1 IS   |   |  | -   | TILEI  |   | ากจะ  |
|--|---|---|--|---|--|---|--|---|---|
|  | CORPORATION<br>ANNUAL REPORT<br>1997  |   | Sandra B. Mortham<br>Secretary of State<br>DIVISION OF CORPORATIONS  |   | Mar 04 1997 8:00am<br>Secretary of State   |   |  |   |   |
| OCUMENT # P95000053437 (6)   |   |   |  |   |  |   |  |   |   |
|  | COUNTING SERVICES   |   |  |   |  |   |  |   | -64.1831  |
| incircal Disc  | a of Duplicon   |   |  |   |  |   |  |   |   |
| Principal Place of Business Mailing Address   2943 SW 145 STREET 12343 SW 145 STREET   AIAMI FL 33186 MIAMI FL 33186-7415  |   |   |  |   |  |   |  |   |   |
|  |   |   |  |   |  | 3. Date incorporated or Qualifie<br>07/06/1995  |  | of Last Re<br>9/1996  | eport   |
|  | lace of Business  | 26  | lailing Address  |   |  | 4. FEI Number<br>65-0593845   |  | No  | plied For<br>t Applicable   |
| Suite, Apt   |   | 27  | uite, Apt #, etc.  |   |  | 5. Certificate of Status Desired  |  | \$8.75 A<br>Fee Re  | quired  |
| City & Stat  |   | 28  | bity & State   | · · · · · · · · · · · · · · · · · · ·   |  | 6. Election Campaign Financing<br>Trust Fund Contribution   |  | \$5.00<br>Added to  | o Fees  |
| Zip  | Country<br>25   | 29  | ip   | 30 Col  | intry  | 8. This corporation has liability 1<br>Florida Statutes   | 🗌 Yes 🗹  | No  | 199.032,  |
|  | 9. Name and Address of<br>STANIAS, NICK   | I Current Hegister  | red Agent  |   | 81 Name  | 10. Name and Address of New   | Hegistered Ag  |   |   |
|  | 343 SW 145 STREET<br>WI FL 33186  |   |  |   | 82 Street Ad   | dress (P.O. Box Number is Not Accep   | table)   |   |   |
|  |   |   |  |   | 83   |   |  |   |   |
|  |   |   |  |   |  |   |  |   |   |
|  |   | <u></u>   | 1500 Electric Out  |   | 84 City  |   | FL   | 85. Zip C   | I   |
| office or<br>agent 1 a   | registered agent, or both, in th<br>am familiar with, and accept th   | he State of Florida.<br>he obligations of, S  | Such change was<br>Section 607.0505, Fi  | authorize<br>lorida Sta   | bove-named co<br>d by the corpor-<br>tutes.  | rporation submits this statement for th<br>ation's board of directors. I hereby ac  | cept the appoir  | hanging its   | s registered  |
| office or<br>agent 1 a<br>GNATURE  | registered agent, or both, in than familiar with, and accept the standard accept the standard region of the standa    | he State of Florida.<br>he obligations of, S  | . Such change was<br>Section 607.0505, Fi<br>Ipplicable. (NO<br>ORS  | authorize<br>orida Sta<br>TE: Registere<br>13.  | bove-named co<br>d by the corpor-<br>tutes.<br>d Agent signature req   | rporation submits this statement for th<br>ation's board of directors. I hereby ac<br>ured when reinstating)<br>ADDITIONS/CHANGES TO OF | DATE   | hanging its<br>ntment as  | s registered<br>registered  |
| office or<br>agent 1 a<br>GNATURE  | registered agent, or both, in the<br>am familiar with, and accept the<br>Signature typed or ponted name of reg<br>OFFICE<br>P<br>LICK KASTENIAS   | he State of Florida.<br>he obligations of, S<br>istercolagent and site if a   | Such change was<br>Section 607.0505, Fi  | authorize<br>orida Sta  | bove-hamed co<br>of by the corpor-<br>tutes.<br>d Agent signature req  | ation's board of directors. I hereby ac   | DATE   | hanging its   | s registered<br>registered<br>S IN 12   |
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