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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # P9500061083 (8)

SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

TITLE	O.I. FUL	FILLMENT, INC.				18118
382 PONCE OE LEON BLVD CORN. CARLES FL. 301M  382 PONCE OE LEON BLVD CORN. CARLES FL. 301M  3. Date Proceptional of Qualified  2. Participal Face of European  38. Tole of Leaf Report  39. Date Proceptional of Qualified  39. State Apt. 4, 6, 100  39. State, Apt. 4, 600	Principal Place o	of Business	Mailing Address			######################################
CORAL CARRES FL 20194  2. Processor Private of European Services Control (1986) 1985  2. Malling Address Core (1986) 1985  2. Malling Address Core (1986) 1985  2. Malling Address Core (1986) 1985  3. Date incorporated or Qualified (1986) 1985  3. Date incorporated (198	ANA DANAT OF LPON BUILD			BLVD.		
2. Pincipal Filter of Business 21 SRS 3. SUD   29 St.   28   39 DO SUB 9 CT.   5. Certificate of Statuto Desired   5. Statuto Statuto   5. Certificate of Statuto Desired   5. Statuto Desired   5. Statuto   5. Certificate of Statuto Desired   5. Statuto Desired	OSE I DITOL DE ELON DETE.			- '		
Second Section Process And Delication					08/08/1995	
Suite, Apil, F. etc.  22   22   22   22   22   22   22   22	_ '			60 OT		
Solidary April 4, 60.    Copy & Stato				189 CJ.	· ·	\$8.75 Additional
Country 29 State 29 M Amin		, etc.	<u>⊢</u> ' '		5. Certificate of Status Desired	<b>~~~</b>
293 M. M. M. M. P. M.		4	City & State		1 ** ** * * * * *	1 /
24 33176 28 U.S.A. 29 3317C 90 MSA Provide Statutes Wes No. 10. Name and Address of New Registered Agent  WHITMAN, RYNNG 3929 PONCE DE LEON BLVD. CORAL GABLES FL 33134  83  City FL 85 Zip Code  11. Fursuant to the provision of Sections 607 0000 and 607 1508. Foods Statutes the above remend corporation submits this statement for the purpose of changing its registered different series with and accept the deblagement of Section 607 0000 and 607 1508. Foods Statutes the above remend corporation submits this statement for the purpose of changing its registered different series with and accept the deblagement of Section 607 0000 principle of Section 607 0000 princ	23 MIA	mi <del>az</del>	28 MIAMI		Trust Fund Contribution	Added to Fees
S. Name and Address of Current Registered Agent  9. Name and Address of New Registered Agent  9. Name and Name Address of New Registered Agent  9. Name and Name Address of New Registered Agent  9. Name and Address of New Registered Ag			<b>─</b>			gible tax under s 199.032, ÎNo
WHITMAN, RYING 3929 PONCE DE LEON BLVD. CORAL GABLES FL 33134  82  Street Address (P.O. Box Number's Not Acceptable)  83  Street Address (P.O. Box Number's Not Acceptable)  84  City  FL 85  85  City  FL 85  86  City  FL 85  87  Core  11. Pursuant to the provisions of Sections 607 (5502 and 607 1508, Florida Statutes. the above named corporation submits this statement for the purpose of changing is registered after surface with and accept the displacence of Section 607 (6505 Florida) Statutes.  SCINATURE  SCINATURE  OFFICERS AND DIRECTORS  13. ADDITIONS CHANGES TO OFFI CERS AND DIRECTORS IN 12  OFFICERS AND DIRECTORS  13. ADDITIONS CHANGES TO OFFI CERS AND DIRECTORS IN 12  14. In III.  CARCA, ROLAND  25. SIRET ADDRESS  27. IT III.  CARCA, ROLAND  28. SIRET ADDRESS  28. SIRET ADDRESS  29. SIRET ADDRESS	24 <u> </u>	Alama and Address of Curre		30 78/71		
3929 PONCE DE LEON BLVD. CORAL GABLES FL 33134  84 City FL 85 Zp Code  11. Pursuant to the provisions of Sections 607,0002 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered often or registered agent, or both, in the State of Florida, Statutes, the above-named corporation's board of directors. Thereby scoept the apportment as registered often or registered agent, or both, in the State of Florida Statutes.  SCRNATURE Signature, byed or painer rare of instance agent and that it special special products are registered often or registered agent, or both in the part of the supportment as registered often or registered agent, or both in the part of the supportment as registered often or registered agent, or both in the part of the supportment as registered often or registered agent, or both in the part of the supportment as registered often or registered agent, or both in the part of the supportment as registered often or r		9. Name and Address of Confe	III negistered Agent	81 Name		
3929 PONCE DE LEON BLVD. CORAL GABLES FL 33134  84 City FL 85 Zp Code  11. Pursuant to the provisions of Sections 607,0002 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered often or registered agent, or both, in the State of Florida, Statutes, the above-named corporation's board of directors. Thereby scoept the apportment as registered often or registered agent, or both, in the State of Florida Statutes.  SCRNATURE Signature, byed or painer rare of instance agent and that it special special products are registered often or registered agent, or both in the part of the supportment as registered often or registered agent, or both in the part of the supportment as registered often or registered agent, or both in the part of the supportment as registered often or registered agent, or both in the part of the supportment as registered often or registered agent, or both in the part of the supportment as registered often or r	WALAITAAAA	I IO/ANG		92 Street	Address (P.O. Box Number is Not Acceptable)	
CORAL GABLES FL 33134    Bit   City   FL   Bit   Zo Code				62 Street /	words to the state of the state	
11. Pursuant to the provisions of Sections 60 / 0500 and 60 / 1508. Florids Stututes, the above nemed corporation submits this statement for the purpose of changing is registered officence statement for the purpose of changing is registered officence statement with an accept the obligations of Section 60 / 0506. Florida Statutes.  SIGNATURE  STOWN Specify plants and of shipping from incitors accept the obligations of Section 60 / 0506. Florida Statutes.  SIGNATURE  OFFICERS AND DIRECTORS  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  THE DAME STATE ADDRESS IN THE STATE OFFICERS AND DIRECTORS IN 12.  THE DAME STATE ADDRESS IN THE STATE OFFICERS AND DIRECTORS IN 12.  THE DAME STATE ADDRESS IN THE STATE OFFICERS AND DIRECTORS IN 12.  THE DAME STATE ADDRESS IN THE STATE OFFICERS AND DIRECTORS IN 12.  THE DAME STATE ADDRESS IN THE STATE OFFICERS AND DIRECTORS IN 12.  THE DAME STATE ADDRESS IN THE STATE OFFICERS AND DIRECTORS IN 12.  THE DAME STATE ADDRESS IN THE STATE OFFICERS AND DIRECTORS IN 12.  THE DAME STATE ADDRESS IN THE STATE OFFICERS AND DIRECTORS IN 12.  THE DAME STATE ADDRESS IN THE STATE OFFICERS AND DIRECTORS IN 12.  THE DAME STATE ADDRESS IN THE STATE OFFICERS AND DIRECTORS IN 12.  THE DAME STATE ADDRESS IN THE STATE OFFICERS AND DIRECTORS IN 12.  THE DAME STATE ADDRESS IN THE STATE OFFICERS AND DIRECTORS IN 12.  THE DAME STATE ADDRESS IN THE STATE OFFICERS AND DIRECTORS IN 12.  THE DAME STATE ADDRESS IN THE STATE OFFICERS AND DIRECTORS IN 12.  THE DAME STATE ADDRESS IN THE STATE OFFICERS AND DIRECTORS IN 12.  THE DAME STATE ADDRESS IN THE STATE OFFICERS AND DIRECTORS IN THE S				83	•	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Floridis Statutes, the above-named corporation submits this statement for the purpose of changing is registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of Section 607.0505. Provided Statutes and Florida Statutes. The registered agent is not contained to the purpose of changing is registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligation of Section 607.0505. Provided Statutes and acceptate agent. I am family and accept the obligation of Section 607.0505. Provided Statutes and acceptate agent. I am family a state of Florida. Such change is a state of Florida.	00.00			84 City		<b>85</b> Zip Code
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CITY-ST-ZIP  TITLE  NAME  SIREET ADDRESS  CITY-ST-ZIP  14. I 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, 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 its regord. Or on an attachment with an address.  SIGNATURE:				5 3 STREET ADDRESS		
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SIREET ADDRESS  City - ST-ZIP  14. I 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, 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 it is good, or on an attachment with an address.  SIGNATIBE:			DELETE			T Cuands T Addition
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