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

PROFIT CORPORATION ANNUAL REPORT

1996.



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

		101
DOCUMENT #	P95000062132	(2)
Corporation Name		-

 Corporation N 	lame		-		- 1					
SINGER	ISLAND LTD., INC.				1	E RODINADO DED NATO ANGLE ADEM BANK S	401 4600 6011	H aa h (1 691)	ANT 18 OL 1 6 O L	
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	/ D. circus	Mailing Address				i 10841801 isa talah arsit aatu aank a		.1981 HUND 11	'ild eibt eant	
Filliopal Flace of Eddinoss		WAY								
170 CELESTIAL WAY BLDG 6-3		BLDG 6-3								
JUNO BEACH	FL 33408	JUNO BEACH F	JUNO BEACH FL 33408			3. Date Incorporated or Qualified 3a. Date of Last Report				
						08/11/1995	L			
2. Principal Plac	ce of Business	2a. Mailing Addres	SS			4. FEI Number 65-062053	^		plied For	
21	,,, o. Daoi 1020	26				64-061043		\$8.75 A	t Applicable	,
Suite, Apt. #,	, etc.	Suite, Apt. #,	etc.			Certificate of Status Desired		Fee Re		ı
22		City & State				6. Election Campaign Financing		\$5.00	May Be	l
City & State		2B				Trust Fund Contribution		Added t		l
7 _{ip}	Country	Zip	Co	untry		8. This corporation has liability for in	ntangible tax	unders 1	99.032,	ĺ
24	25	29	30			Florida Statutes Yes 10. Name and Address of New Re		ent .		1
	9. Name and Address of Curre	nt Registered Agent		O4 Namo		10. Name and Address of New Pi	ağısınını Ağ	<u> </u>		
				81 Name						ł
FILINGS,				82 Street	Addres	s (P.O. Box Number is Not Acceptable	e)		'	
3732 NV				83						İ
FT LAUC	DERDALE FL 33311							[ap] 7:	Code	-
ì				84 City			FL			
	Decisions of Cootions 607.050	2 and 607 1508 Florida	Statutes, the at	ove-named o	corporat	ion submits this statement for the pur of directors. I hereby accept the appo	pose of chan	ging its re	gistered office	
or registere	ed agent, or both, in the State of Flo	rida. Such change was	authorized by the	corporation ⁴	s board	ion submits this statement for the pur of directors. I hereby accept the appo	ontrient as re	yustered a	igoni. ram	
familiar wit	h, and accept the obligations of, Sec	3 ADRIOL 1 , COCO. 100 [10][C	Statutiou.							
SIGNATURE _	Signature, typed or printed name of registered ago	ont and title if applicable.	(NOTE: Register	ed Agent signatur	e required v	when reinstating) ADDITIONS/CHANGES TO OFF	DATE CEDS AND I	DIRECTOR	3S IN 12	3
12.		ND DIRECTORS	13		7	ADDITIONS/CHANGES TO OFF	ICERS AND	Change	Addition	12
TITLE	D	☐ DEL		TITLE	1		_		_	CR2E034 (12/95)
NAME	LIUDZIUS, LEONAS		1	NAME STREET ADDRESS						<u>iii</u>
STREET ADDRESS	170 CELESTIAL WAY BLDG JUNO BEACH FL 33408) 0·3		CITY-ST-ZIP	١]Ķ
CITY-ST-ZIP	JUNU DEACH FL 33400	DEL		I TITLE	1	/5	_	, ,	Addition	10
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1	1	_ \	6	4 CITY-ST-ZIP						

11Y-SI-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 of 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 dyanged, or an ay ittad/ment with an address. 04 23 86

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

407-694-1000