SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998. AMOUNT DUE ON OR BEFORE 09/30/98: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750).

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name	P95000070878 (0)
--------------------------------	----------------	----

FILED Oct 01 1998 8:00am Secretary of State

MAMON	HOFF &	CO., INC.																[
Principal Plac	ce of Bus ine			Mailing A	Address					111							(888)	
17797 B LAKE				•		N DD												
LUTZ FL 33549		л		LUTZ FL 3	LAKE CARLTOI 33549	N DK												
	•				JU 10							DO NOT	WRITE	IN THE	S S PA	.CE		
										3. Date Inc	orporate	d or Que	lified		-			
										09/11/1	995							
2. Principal F					ng Address					4. FEI Nun	ber					Ap	plied For	\neg
		ANT CT			03 VER	PANT	rc	7.		65-06	09968					No	t Applicab	le l
Suite, Apt.))) '	Apt. #, etc.					5. Certifica	le of Sta	tue Doei	rad	П	\$1	3.75 /	Additional	$\overline{}$
22 # 108			· · ·		108					J. Continua	10 01 012	itus Desii	6 u			Fee Re	quired	
City & Sta		دييم			8. State	و سسو				6. Election	Ca mpai	gn Finan	cing		\$	5.00	May Be	
23 TAM	PA	PL		28 //	MPA,	1				Trust Fu	nd Cont	ribution				Added t	o Fees	
Zip 336	(2) 9	Country		Zip	629		ountry	1		8. This corp					_	~~	, ·	
24 000		25 USA		1-1-		30 0	V>/	7 	<u>_</u>		<u> </u>	ly Tax du			Ye		No	_
		e and Address	of Current	Registered A	Agent		81	Nome		10. Name a	nd Add	ess of N	ew Re	gistered	Agen	<u>t</u>		
		ALEJANDRO					0'	Name //	AM	ONTOF	7	41E0	MN	DRC)			
		CARLTON DR	(82	Street A	Address	(P.O. Box N	lumber	is Not Ac	ceptabl	e)				
LUI	Z FL 33 549	9					83			VERDI	PNT	CT						_
							63	#	10	8								
							84	City	Trad or	784			· · ·		85	Zip (ode (29	-
								•		•				FL	-	33	629	
			007.000															_
office or	ito (ne provi regist ere ora	isions of sections	607.0502 the State o	and 607.1508 of Florida, Sua	i, Florida Statu	utes, the a	above-r	named cor the corpor	orporation's	on submits the board of dir	is state	ment for t	he purp	ose of c	hangin	g its reg	istered	_
office or agent.	registered a am familia	isions of sections igent, or both, in with, and accept			3, Florida Stati ni change was on 607,0505, I	utes, the a s authoriz Florida St	above-r ed by tatutes.	named cor the corpor	orporation's	on submits the board of dis	is stater ectors.	ment for t hereby a	he purp accept t	ose of c	hangin in tm er	ig its reg it as reg	istered istered	_
office or agent. I	Alest	under Li	amo	whole	ALFT	UNDE	0 /	Za MUN	レメログ	F. F	is stater ectors.	nent for the hereby a	he purp accept t	ose of c the appo	hangin intmer 27-	ng its reg nt as reg 98	istered jistered	
SIGNATURE	Alest	d or printed name of re	GUNNOS gislered agent s	and time applicable	ALEGO	4NDEC (NOTE: Regis	stered Ag	Za MUN	レメログ	when feinstating	ees 13	ENT		9	27-	ng its reg nt as reg 98	gistered gistered	
	Alest	d or printed name of re	GUNNOS gislered agent s	whole	ALEGO S	4NDEC (NOTE: Regis	stered Ag 3.	Za MUN	レナウバ e required	when feinstating ADDITION	ees 13	ENT		9	27- N D DII	ng its reg nt as reg 98 RECTO	pistered pistered	
SIGNATURE	ije saturiji yped	d or printed name of re	gislered agent of	and time applicable	ALEGO	(NOTE: Regis	stered Ag 3. TITLE	A II UN ent signature	e required	when feinstating ADDITION	IS/CHA	NGES TO	OFFIC	DATE CERS A	27- ND DII XX o	ng its reg nt as reg 98 RECTO	gistered gistered	n
SIGNATURE 12. TITLE NAME	D MAMONT	OFFI ALEJAN	gislered agent a	and time applicable	ALEGO S	10 DEC (NOTE: Regis 13 1.1 1 1.21	stered Ag 3. TITLE NAME	74 /1 UN ent signature	e required	when feinstating ADDITION	IS/CHAI	NGES TO	OFFIC	DATE CERS A	27-	ng its reg nt as reg 98 RECTO	pistered pistered	n .
SIGNATURE 12. TITLE NAME STREET ADDRESS	D MAMONT 17767 B	d or printed name of re OFFIC OFFIC	gislered agent a	and time applicable	ALEGO S	1.3 S	stered Ag 3. TITLE NAME STREET A	ADDRESS .	P/. 17 A 310	when feinstating ADDITION D ADDITION AD	IS/CHAI	NGES TO	OFFIC	DATE CERS AI DEC 108	27-	ng its reg nt as reg 98 RECTO	pistered pistered	an .
SIGNATURE 12. TITLE NAME	D MAMONT	d or printed name of re OFFIC OFFIC	gislered agent a	and time applicable	ALEGY S DELETE	(NOTE: Regis (NOTE: Regis 13 1.1" 1.21 1.35 1.40	stered Ag 3. TITLE NAME STREET A	ADDRESS .	P/. 17 A 310	when feinstating ADDITION	IS/CHAI	NGES TO	OFFIC	DATE CERS AI DEC 108	ZZ-	ig its reg it as reg 98 RECTO	gistered gistered RS IN 12	
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	D MAMONT 17767 B LUTZ FL D	d or printed name of re OFF, ALEJAN LAKE CARLTO 33549	gislered agent a CERS AND DRO DN DR	and time applicable	ALEGO S	(NOTE: Regis 13 1.1.1 1.2.1 1.3.5 1.4.0 2.1.1	Stered Ag. 3. TITLE NAME STREET A CITY-ST-2 TITLE	ADDRESS .	P/OF	when feinstating ADDITION D HONTO 3 VER	IS/CHAI FF, DAN FL	NGES TO ALE T CT:	OFFIC JULY	DATE DERS AI DEC 108	27-	ig its reg it as reg 98 RECTO	pistered pistered	
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D MAMONT 17767 B LUTZ FL D MAMONT	d or printed name of re OFF, ALEJAN LAKE CARLTO 33549	gislered agent a CERS AND DRO DN DR	and time applicable	ALEGY S DELETE	4 N D E C (NOTE: Regis 13 1.1 1 1.2 1 1.3 5 1.4 0 2.1 1 2.2 f 1 1 1 2.2 f 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	SIGNATURE NAME STREET A CITY-ST-2 TITLE NAME	ADDRESS .	P/OF	when feinstating ADDITION D HONTO 3 VER	IS/CHAI FF, DAN FL	NGES TO ALE T CT:	OFFIC JULY	DATE DERS AI DEC 108	ZZ-	ig its reg it as reg 98 RECTO	gistered gistered RS IN 12	
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	D MAMONT 17787 B LUTZ FL D MAMONT 17787 B	d or printed name of re OFF, ALEJAN LAKE CARLTO 33549 TOFF, CATHER LAKE CARLTO	gislered agent a CERS AND DRO DN DR	and time applicable	ALEGY S DELETE	4 N D E C (NOTE: Regis 13 1.1 1 1.2 f 1.3 5 1.4 6 2.1 1 2.2 f 2.3 \$	STREET A	ADDRESS ADDRESS	P/OFF P/OFF	When feinelating ADDITION ADDI	IS/CHAI IS/CHAI IFF, DAAN FL IFF, (ILRO	NGES TO MLE T CT: 33	OFFICE PLAN	DATE DERS AI DEC 108	ZZ-	ig its reg it as reg 98 RECTO	gistered gistered RS IN 12	
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D MAMONT 17767 B LUTZ FL D MAMONT	d or printed name of re OFF, ALEJAN LAKE CARLTO 33549 TOFF, CATHER LAKE CARLTO	gislered agent a CERS AND DRO DN DR	and time applicable	DELETE	(NOTE: Regis (NOTE: Regis 13 1.1 1.2 1.3 1.4 2.1 2.2 2.3 2.4	STREET A CITY-ST-2 CITY-ST-2 CITY-ST-2 CITY-ST-2 CITY-ST-2 CITY-ST-2 CITY-ST-2	ADDRESS ADDRESS	P/OFF P/OFF	when feinstating ADDITION D HONTO 3 VER	IS/CHAI IS/CHAI IFF, DAAN FL IFF, (ILRO	NGES TO MLE T CT: 33	OFFICE PLAN	DATE DERS AI DEC 108	DE C	ng its regit as regit	pistered pistered RS IN 12 Addition	חל
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MAMONT 17787 B LUTZ FL D MAMONT 17787 B	d or printed name of re OFF, ALEJAN LAKE CARLTO 33549 TOFF, CATHER LAKE CARLTO	gislered agent a CERS AND DRO DN DR	and time applicable	ALEGY S DELETE	(NOTE: Registro) 13 1.1" 1.21 1.35 1.4(2.11) 2.21 2.35 2.4(3.11)	STREET A CITY-ST-2 TITLE NAME STREET A CITY-ST-2 TITLE NAME STREET A CITY-ST-2 TITLE	ADDRESS ADDRESS	P/OFF P/OFF	When feinelating ADDITION ADDI	ISICHAI ISICHAI IFF, DAAN FL IFF, (ILRO	NGES TO MLE T CT: 33	OFFICE PLAN	DATE DERS AI DEC 108	DE C	ig its reg it as reg 98 RECTO	gistered gistered RS IN 12	חל
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D MAMONT 17787 B LUTZ FL D MAMONT 17787 B	d or printed name of re OFF, ALEJAN LAKE CARLTO 33549 TOFF, CATHER LAKE CARLTO	gislered agent a CERS AND DRO DN DR	and time applicable	DELETE	(NOTE: Registro) 13 1.1" 1.21 1.38 1.44 2.11 2.21 2.38 2.40 3.11 3.21	STATE THE STREET A CITY-ST-2 TITLE NAME STREET A CITY-ST-2 TITLE NAME STREET A CITY-ST-2 TITLE NAME	ADDRESS ADDRESS	P/OFF P/OFF	When feinelating ADDITION ADDI	ISICHAI ISICHAI IFF, DAAN FL IFF, (ILRO	NGES TO MLE T CT: 33	OFFICE PLAN	DATE DERS AI DEC 108	DE C	ng its regit as regit	pistered pistered RS IN 12 Addition	חל
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	D MAMONT 17787 B LUTZ FL D MAMONT 17787 B	d or printed name of re OFF, ALEJAN LAKE CARLTO 33549 TOFF, CATHER LAKE CARLTO	gislered agent a CERS AND DRO DN DR	and time applicable	DELETE	(NOTE: Registronia) 1.11 1.21 1.38 1.44 2.11 2.27 2.38 2.44 3.11 3.21 3.38	STREET A CITY-ST-2 TITLE NAME NAME STREET A CITY-ST-2 TITLE NAME STREET A CITY-ST-2 TITLE NAME STREET A STREET A	ADDRESS ADDRESS ADDRESS	P/OFF P/OFF	When feinelating ADDITION ADDI	ISICHAI ISICHAI IFF, DAAN FL IFF, (ILRO	NGES TO MLE T CT: 33	OFFICE PLAN	DATE DERS AI DEC 108	DE C	ng its regit as regit	pistered pistered RS IN 12 Addition	חל
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D MAMONT 17787 B LUTZ FL D MAMONT 17787 B	d or printed name of re OFF, ALEJAN LAKE CARLTO 33549 TOFF, CATHER LAKE CARLTO	gislered agent a CERS AND DRO DN DR	and time applicable	DELETE DELETE	(NOTE: Registro) 13 1.11 1.21 1.38 1.44 2.11 2.21 2.38 2.40 3.11 3.21 3.38 3.40	STATE THE NAME STREET A CITY-ST-2 TITLE	ADDRESS ADDRESS ADDRESS	P/OFF P/OFF	When feinelating ADDITION ADDI	ISICHAI ISICHAI IFF, DAAN FL IFF, (ILRO	NGES TO MLE T CT: 33	OFFICE PLAN	DATE DERS AI DEC 108	ND DIII	ng its regit as regit	pistered pistered RS IN 12 Addition Addition	on .
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME TREET ADDRESS CITY-ST-ZIP TITLE	D MAMONT 17787 B LUTZ FL D MAMONT 17787 B	d or printed name of re OFF, ALEJAN LAKE CARLTO 33549 TOFF, CATHER LAKE CARLTO	gislered agent a CERS AND DRO DN DR	and time applicable	DELETE	(NOTE: Registronia) 1.11 1.21 1.38 1.44 2.11 2.21 2.38 2.44 3.11 3.21 3.38 3.44 4.17	STREET A CITY-ST-2 TITLE NAME STREET A CITY-ST-2 TITLE NAME STREET A CITY-ST-2 TITLE NAME STREET A CITY-ST-2 TITLE	ADDRESS ADDRESS ADDRESS	P/OFF P/OFF	When feinelating ADDITION ADDI	ISICHAI ISICHAI IFF, DAAN FL IFF, (ILRO	NGES TO MLE T CT: 33	OFFICE PLAN	DATE DERS AI DEC 108	ND DIII	ng its regit as regit	pistered pistered RS IN 12 Addition	on .
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME NAME	D MAMONT 17787 B LUTZ FL D MAMONT 17787 B	d or printed name of re OFF, ALEJAN LAKE CARLTO 33549 TOFF, CATHER LAKE CARLTO	gislered agent a CERS AND DRO DN DR	and time applicable	DELETE DELETE	(NOTE: Registry) 13 1.11 1.24 1.38 1.40 2.11 2.24 2.38 2.40 3.11 3.21 3.38 3.40 4.17	STEET A CITY-ST-2 TITLE NAME STREET A CITY-ST-2 TITLE NAME STREET A CITY-ST-2 TITLE NAME NAME NAME NAME NAME NAME NAME NAM	ADDRESS	P/OFF P/OFF	When feinelating ADDITION ADDI	ISICHAI ISICHAI IFF, DAAN FL IFF, (ILRO	NGES TO MLE T CT: 33	OFFICE PLAN	DATE DERS AI DEC 108	ND DIII	ng its regit as regit	pistered pistered RS IN 12 Addition Addition	on .
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	D MAMONT 17787 B LUTZ FL D MAMONT 17787 B	d or printed name of re OFF, ALEJAN LAKE CARLTO 33549 TOFF, CATHER LAKE CARLTO	gislered agent a CERS AND DRO DN DR	and time applicable	DELETE DELETE	(NOTE: Registry) 13 1.11 1.24 1.35 1.40 2.11 2.21 2.35 2.41 3.31 3.21 3.38 3.40 4.11 4.24 4.35	STREET A CITY-ST-2 TITLE NAME STREET A STREET A	ADDRESS ADDRESS ZIP ADDRESS ZIP ADDRESS	P/OFF P/OFF	When feinelating ADDITION ADDI	IS/CHAI IS/CHAI IFF, DAAN FL IFF, (ILRO	NGES TO MLE T CT: 33	OFFICE PLAN	DATE DERS AI DEC 108	ND DIII	ng its regit as regit	pistered pistered RS IN 12 Addition Addition	on .
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME NAME	D MAMONT 17787 B LUTZ FL D MAMONT 17787 B	d or printed name of re OFF, ALEJAN LAKE CARLTO 33549 TOFF, CATHER LAKE CARLTO	gislered agent a CERS AND DRO DN DR	and time applicable	DELETE DELETE DELETE	(NOTE: Registry) 13 1.1' 1.24 1.38 1.40 2.11 2.21 2.38 2.41 3.11 3.21 3.38 3.40 4.11 4.24 4.38 4.40	STEET A CITY-ST-2 TITLE NAME STREET A CITY-ST-2	ADDRESS ADDRESS ZIP ADDRESS ZIP ADDRESS	P/OFF P/OFF	When feinelating ADDITION ADDI	IS/CHAI IS/CHAI IFF, DAAN FL IFF, (ILRO	NGES TO MLE T CT: 33	OFFICE PLAN	DATE DERS AI DEC 108	ND DIII	ng its regit as regit	RS IN 12 Addition Addition Addition	חח
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME	D MAMONT 17787 B LUTZ FL D MAMONT 17787 B	d or printed name of re OFF, ALEJAN LAKE CARLTO 33549 TOFF, CATHER LAKE CARLTO	gislered agent a CERS AND DRO DN DR	and time applicable	DELETE DELETE	(NOTE: Registry (NOTE: Registr	stered Age 3. TITLE NAME STREET A CITY-ST-2 TITLE	ADDRESS ADDRESS ZIP ADDRESS ZIP ADDRESS	P/OFF P/OFF	When feinelating ADDITION ADDI	IS/CHAI IS/CHAI IFF, DAAN FL IFF, (ILRO	NGES TO MLE T CT: 33	OFFICE PLAN	DATE DERS AI DEC 108	ND DIII	ng its regit as regit	pistered pistered RS IN 12 Addition Addition	חח
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D MAMONT 17787 B LUTZ FL D MAMONT 17787 B	d or printed name of re OFF, ALEJAN LAKE CARLTO 33549 TOFF, CATHER LAKE CARLTO	gislered agent a CERS AND DRO DN DR	and time applicable	DELETE DELETE DELETE	(NOTE: Registry (NOTE: Registr	STOREST A COTY-ST-2 TITLE NAME STREET A COTY-ST-2 TITLE NAME	ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS ADDRESS	P/OFF P/OFF	When feinelating ADDITION ADDI	IS/CHAI IS/CHAI IFF, DAAN FL IFF, (ILRO	NGES TO MLE T CT: 33	OFFICE PLAN	DATE DERS AI DEC 108	ND DIII	ng its regit as regit	RS IN 12 Addition Addition Addition	חח
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	D MAMONT 17787 B LUTZ FL D MAMONT 17787 B	d or printed name of re OFF, ALEJAN LAKE CARLTO 33549 TOFF, CATHER LAKE CARLTO	gislered agent a CERS AND DRO DN DR	and time applicable	DELETE DELETE DELETE	(NOTE: Registry (NOTE: Registr	STREET A CITY-ST-2 TITLE NAME STREET A	ADDRESS ADDRESS ZIP ADDRESS ZIP ADDRESS ZIP ADDRESS	P/OFF P/OFF	When feinelating ADDITION ADDI	IS/CHAI IS/CHAI IFF, DAAN FL IFF, (ILRO	NGES TO MLE T CT: 33	OFFICE PLAN	DATE DERS AI DEC 108	ND DIII	ng its regit as regit	RS IN 12 Addition Addition Addition	חח
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D MAMONT 17787 B LUTZ FL D MAMONT 17787 B	d or printed name of re OFF, ALEJAN LAKE CARLTO 33549 TOFF, CATHER LAKE CARLTO	gislered agent a CERS AND DRO DN DR	and time applicable	DELETE DELETE DELETE DELETE	(NOTE: Registry (NOTE: Registr	STREET A CITY-ST-Z TITLE NAME STREET A CITY-ST-Z	ADDRESS ADDRESS ZIP ADDRESS ZIP ADDRESS ZIP ADDRESS	P/OFF P/OFF	When feinelating ADDITION ADDI	IS/CHAI IS/CHAI IFF, DAAN FL IFF, (ILRO	NGES TO MLE T CT: 33	OFFICE PLAN	DATE DERS AI DEC 108	ND DIII	regits regit as regit	RS IN 12 RS IN 12 Addition Addition Addition Addition Addition	n n
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D MAMONT 17787 B LUTZ FL D MAMONT 17787 B	d or printed name of re OFF, ALEJAN LAKE CARLTO 33549 TOFF, CATHER LAKE CARLTO	gislered agent a CERS AND DRO DN DR	and time applicable	DELETE DELETE DELETE	(NOTE: Registry (NOTE: Registr	STREET A CITY-ST-Z TITLE NAME STREET A CITY-ST-Z TITLE	ADDRESS ADDRESS ZIP ADDRESS ZIP ADDRESS ZIP ADDRESS	P/OFF P/OFF	When fellelating ADDITION ADDI	IS/CHAI IS/CHAI IFF, DAAN FL IFF, (ILRO	NGES TO MLE T CT: 33	OFFICE PLAN	DATE DERS AI DEC 108	ND DIII	ng its regit as regit	RS IN 12 Addition Addition Addition	n n
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D MAMONT 17787 B LUTZ FL D MAMONT 17787 B	d or printed name of re OFF, ALEJAN LAKE CARLTO 33549 TOFF, CATHER LAKE CARLTO	gislered agent a CERS AND DRO DN DR	and time applicable	DELETE DELETE DELETE DELETE	(NOTE: Registry (NOTE: Registr	STREET A CITY-ST-2 TITLE NAME	ADDRESS ADDRESS ZIP ADDRESS ZIP ADDRESS ZIP ADDRESS ZIP ADDRESS ZIP	P/OFF P/OFF	When fellelating ADDITION ADDI	IS/CHAI IS/CHAI IFF, DAAN FL IFF, (ILRO	NGES TO MLE T CT: 33	OFFICE PLAN	DATE DERS AI DEC 108	ND DIII	regits regit as regit	RS IN 12 RS IN 12 Addition Addition Addition Addition Addition	n n
SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D MAMONT 17787 B LUTZ FL D MAMONT 17787 B	d or printed name of re OFF, ALEJAN LAKE CARLTO 33549 TOFF, CATHER LAKE CARLTO	gislered agent a CERS AND DRO DN DR	and time applicable	DELETE DELETE DELETE DELETE	(NOTE: Registronia (NOTE: Regist	STREET A CITY-ST-Z TITLE NAME STREET A CITY-ST-Z TITLE	ADDRESS ADDRESS ZIP ADDRESS ZIP ADDRESS ZIP ADDRESS ZIP ADDRESS ZIP ADDRESS	P/OFF P/OFF	When fellelating ADDITION ADDI	IS/CHAI IS/CHAI IFF, DAAN FL IFF, (ILRO	NGES TO MLE T CT: 33	OFFICE PLAN	DATE DERS AI DEC 108	ND DIII	regits regit as regit	RS IN 12 RS IN 12 Addition Addition Addition Addition Addition	n n

indicated on this annual report or supplied with this lifting does not quality for the exemption stated in section 119.07(3)(i). 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 only 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 changed or on an attachment with an address.