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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

P95000079464 (0)

1. Corporation Name

DOCUMENT #

OTOMY LATHING, INC.

Principal Plac	e of Business	Mailing Address	,, ,, , ,	A CENTINDS IN THE STATE OF		87868 WILLIAM WIST 188
1721 N.W. 1 WAY POMPANI BEACH FL 33060		1721 N.W. 1 WAY POMPANI BEACH FL 33060				
				3. Date Incorporated or Qualfied 10/16/1995	3a. Date of Last f	Report
_2, Fancipai F 21	Place of Business	2a. Mailing Address		4. Ft Number	322	Applied For
Suite, Apt	#, etc.	26		63-0649	1772	Not Applicable
City & Sta		27		5. Certificate of Status Desired		5 Additional Required
23		City & State		6. Election Campaign Financing Trust Fund Contribution		00 May Be ed to Fees
Ζφ !4	Country	Zip	Country	8. This corporation has liability for	intangible tax under s	199.032,
	25 9. Name and Address of Cu	report Poglistered Appet	30		s XNo	
	5. Italio allo Address of Ct	ment negistered Agent	81 Name	10. Name and Address of New I	Registered Agent	
RAMII	REZ, ISIDRO					
	N.W. 1 WAY		82 Street Add	iress (P.O. Box Number is Not Acceptal	ble)	
	PANI BEACH FL 33060		83			
. 01.11	THE DESCRIPTION OF THE COOLS		63			
			84 City		85 Zi	ip Code
11. Pursuant	to the provisions of Sections 607.	0502 and 607 1508 Florida Otal de	the shape and the	ration submits this statement for the pu		
familiar w	ith, and accept the obligations of,	Section 607.0505, Florida Statutes	ed by the corporation's boa	ration submits this statement for the purific of directors. Thereby accept the app	ointment as registered	dagent lam
SIGNATURE:	Signuture, typed or printed name of registered	agent and title if applicable number of	TE Board-root A and son or in con-	Saladara en a		
		agent and title if applicable (NO AND DIRECTORS	TE: Registered Agend signature return		DATE	SDO IN 40
12.			TE Proprieted Agent signature return 13. 1.1 Title	O What resistancy ADDITIONS/CHANGES TO OF F	ICERS AND DIRECTO	
12.	PD RAMIREZ, ISIDRO	AND DIRECTORS	13.			DRS IN 12
12. TITLE NAME	PD RAMIREZ, ISIDRO 1721 N.W. 1 WAY	S AND DIRECTORS DELETE	13. 1.1 THLE 1.2 NAME		ICERS AND DIRECTO	
12. TITLE NAME STREET ACIDRESS	PD RAMIREZ, ISIDRO	S AND DIRECTORS DELETE	13. 1.1 TILLE 1.2 NAME 1.3 STREET ADDRESS		ICERS AND DIRECTO	
12. Title NAME Streft Audress City-St-7/P	PD RAMIREZ, ISIDRO 1721 N.W. 1 WAY	S AND DIRECTORS DELETE	13. 1.1 THLE 1.2 NAME		ICERS AND DIRECTO	Addition
III. HITLE HAME STREET ACIDNESS STLY-ST-7IP HILE	PD RAMIREZ, ISIDRO 1721 N.W. 1 WAY	AND DIRECTORS DELETE 33060	13. 1.1 TILLE 1.2 NAME 1.3 STREET ADDRESS 1.4 City - St. Zie		ICERS AND DIRECTO	
12. TITLE NAME STREET ACIDNESS CITY-ST-ZIP TILE 14ME	PD RAMIREZ, ISIDRO 1721 N.W. 1 WAY	AND DIRECTORS DELETE 33060	13. 1.1 TILLE 1.2 NAME 1.3 STREET ADDRESS 1.4 QUY-SLIZE 2.1 TILEE		ICERS AND DIRECTO	Addition
12. HAME STREET AUDRESS CITY-ST-ZIP HAME HAME STREET AUDRESS CITY-SZ-ZIP	PD RAMIREZ, ISIDRO 1721 N.W. 1 WAY	AND DIRECTORS DELETE 33060	13. 1.1 TILLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST ZIP 2.1 TILLE 2.2 NAME		ICERS AND DIRECTO	Addition
12. HILE VAME STREET AUDRESS CHY-ST-ZIP HLE JAME STREET ACDRESS CTY-S7-ZIP HLE	PD RAMIREZ, ISIDRO 1721 N.W. 1 WAY	AND DIRECTORS DELETE 33060	13. 1.1 TILLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST ZIP 2.1 TILEF 2.2 NAME 2.3 STREET ADDRESS		ICERS AND DIRECTO	Addition
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12. THEF NAME STREET AUDRESS CHY-ST-ZIP HEF STREET ACCRESS CTY-SZ-ZIP HEF HAME HAME HAME HAME HAME HAME HAME HAME	PD RAMIREZ, ISIDRO 1721 N.W. 1 WAY	S AND DIRECTORS DELETE 33060 DELETE	13. 1.1 TILLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY - ST. ZIF 2.1 TILLE 22 NAME 23 STREET ADDRESS 2.4 CITY - ST. ZIP 3.1 TILLE 32 NAME 33 STREET ADDRESS 3.4 CITY - ST. ZIP		ICERS AND DIRECTO	Addition
12. THEF NAME STREET AUDRESS CHY-ST-ZIP HILE 44ME STREET ACDRESS CTY-ST-ZIP HILE HAME HAME HAME HAME HAME HAME HAME HAM	PD RAMIREZ, ISIDRO 1721 N.W. 1 WAY	SAND DIRECTORS DELETE 33060	13. 1.1 TIPLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST ZIF 2 THITEF 22 NAME 23 STREET ADDRESS 2.4 CITY-ST-ZIP 3 THILE 32 NAME 33 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 THE		ICERS AND DIRECTO	Addition
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SIGNATURE:

SIGNATURE AND TYPE OR PUNTED NAME OF SIGNING OFFICER OR DIRECTOR

3/26/94 914/941-1854