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

PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

SIGNATURE:

| OCUN Corporation | MENT # P9500 |) סכבו סטטר | */ | |
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| RAPOR, INC. | | | | |
| Principal Place | of Business | Mailing Address | | |
| 6 BRIAR PAT | TCH LN T 06811-3504 | 6 BRIAR PATCH LN DANBURY CT 06811 | -3504 | |
| • | . • • • • • • • • • • • • • • • • • • • | | | 3. Date Incorporated or Qualified 3a. Date of Last Report 10/19/1995 |
| . Principal Pla | ace of Business | 2a. Mailing Address | | 4. FEI Number Applied Fo |
| | | 26 | | 06-1440017 Not Applic |
| Suite, Apt. | #, etc. | Suite, Apt. #, etc. | | 5, Certificate of Status Desired See Required |
| City & State | | City & State | | 6. Election Campaign Financing \$5.00 May Re |
| | • | 28 | | Trust Fund Contribution Added to Fees |
| Zφ | Country | Zip | Country | 8. This corporation has liability for intangible tax under s 199.032, |
| <u> </u> | 25 Name and Address of Curr | 29 | 30 | Florida Statutes Yes No 10. Name and Address of New Registered Agent |
| | 9. Name and Address of Curr | ent negistered Agent | 81 Name | (U. Hame and Madeco et New York New York |
| DAVED | JAMES D | | 82 Street Add | dress (P.O. Box Number is Not Acceptable) |
| | VENIDA DEL SOL | | 62 Street Add | Dress (F.O. Dox Northber is Not Acceptable) |
| BOCA RATON FL 33432 | | | 83 | |
| ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | *************************************** | | 84 City | 85 Zip Code |
| | | | [51] 517, | FL S Z S S S S S S S S |
| I1. Pursuant | to the provisions of Sections 607.05 | 02 and 607.1508, Florida Stat | utes, the above-named corpo | pration submits this statement for the purpose of changing its registered |
| or reaister | red agent, or both, in the State of Fi th, and accept the obligations of, Se | orida. Such change was author action 607.0505, Florida Statut | rized by the corporation's boa es. | ard or directors. I hereby accept the appointment as registered agent. I a |
| or register familiar wi | red agent, or both, in the State of Fi th, and accept the obligations of, So Signature, typed or printed name of registered as | orida. Such change was author action 607.0505, Florida Statut | rized by the corporation's boa | ard or directors. I hereby accept the appointment as registered agent. I a |
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OF SIGNING OFFICER OR DIRECTOR

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