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PROFIT CORPORATION ANNUAL REPORT

1996

TITLE

NAME

STREET ADDRESS



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

Principal Place of Business 1500 ROBERTS DRIVE 140KSONVILLE BEACH FL 32250 3. Diste Incorporated or Qualified 3a. Diste of Last Report 10/20/1995 3. Diste Incorporated or Qualified 3a. Diste of Last Report 10/20/1995 3. Diste Incorporated or Qualified 3a. Diste of Last Report 10/20/1995 3. Diste Incorporated or Qualified 3a. Diste of Last Report 10/20/1995 3. Diste Incorporated or Qualified 3a. Diste of Last Report 10/20/1995 3. Diste Incorporated or Qualified 3a. Diste of Last Report 10/20/1995 3. Diste Incorporated or Qualified 3a. Diste of Last Report 10/20/1995 3. Diste Incorporated or Qualified 3a. Diste of Last Report 10/20/1995 3. Diste Incorporated or Qualified 3a. Diste of Last Report 10/20/1995 3. Diste Incorporated or Qualified 3a. Diste of Last Report 10/20/1995 3. Diste Incorporated or Qualified 3a. Diste of Last Report 10/20/1995 3. Diste Incorporated or Qualified 3a. Diste of Last Report 10/20/1995 3. Diste Incorporated or Qualified 3a. Diste of Last Report 10/20/1995 3. Diste Incorporated or Qualified 3a. Diste of Last Report 10/20/1995 3. Diste Incorporated or Qualified 3a. Diste of Last Report 10/20/1995 3. Diste Incorporated or Qualified 3a. Diste of Last Report 10/20/1995 3. Diste Incorporated or Qualified 3a. Diste of Last Report 10/20/1995 3. Diste Incorporated or Qualified 3a. Diste Incorporated or Qualified 3a. Diste of Last Report 10/20/1995 3. Diste Incorporated or Qualified 3a. Diste of Last Report 10/20/1995 3a. Diste Incorporated or Qualified 15. Diste Incorporated Incorporated or Qualified 15. Diste Incorporated Inc	DOCUN 1, Corporation															
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9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name SAIDAHMED, MOHAMED 1500 ROBERTS DRIVE JACKSONVILLE BEACH FL 32250 83 64 City JACKSONVILLE BEACH FL 32250 84 City JACKSONVILLE BEACH FL 32250 85 Street Address (P.O. Box Number is Not Acceptable) 11. Pursuant to the provisions of Sections 607.050? and 607.1508, Florida Statutes, the above-named conporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE 869 12. OF FICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 11. Inte 12. OF FICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 11. Inte 12. NAME SAIDAHMED, MOHAMED 13. SIRRET ADDRESS 15. OR OBBERTS DRIVE 14. City St. Zip 13. STREET ADDRESS 15. OR OBBERTS DRIVE 14. City St. Zip 15. TACKED N.YILLE 15. Change Addition 15. Addition 15. Addition 15. Addition 15. Addition 15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 16. Change Addition 17. PACKED N.YILLE 18. Change Addition 18. Addition 19. Change Addition 19. Change Addition	Zip			untry	Zip 222.46 Country											
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CITY-ST-7(P 64 CITY-ST-ZIP g is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name iment with an address. 14. I do hereby certify that the information supplied with this fill certify that the information indicated on this annual report oath; that I am an officer or director of the corporation or it appears in Block 12 or Block 13 if changed, or on an attico.

6 1 TITLE

62 NAME

6.3 STREET ADDRESS

SIGNATURE: NAME OF SIGNING OFFICER OR DIRECTOR SAID AHMED 4-29-96

DELETE

CRZE034 (12/95)