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

C/O THE HERRICK COMPANY

**SUITE 222** 

2295 CORPORATE BLVD., N.W.



	PROFIT RPORATION UAL REPORT 1996		FLORIDA DEPAR' Sandra B Secretary DIVISION OF C	Mortham of State	
1. Corporation	IMENT # F	9500008	36277 (7)		
Principal Place of Business		M	aling Address		
SUITE 222	orate blvd., n.w. On Fl 33431		2295 Corporate BLVD. Suite 222 Boca Raton FL 33431	, N.W.	
2. Principal Place of Business		<b>├</b>	. Mailing Address		. =
21		26	0.74 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4 - 4		
Suite, Apt. #, etc.		اخا	Suite, Apt #, etc.		
22		27	City & State		
City & State		28	City of State		
23	Cour			Country	
Zip <b>24</b>	25	29	£ 141	30	
£4		Iress of Current Regi	stered Agent	·	
	J			81	Name



8. This corporation has liability for intangible fax under s 199 032, Fiorida Statutes Yes Ao

10. Name and Address of New Registered Agent

3a. Date of Last Report

Applied For

Fee Required \$5.00 May Be

Added to Fees

Not Applicable \$8.75 Additional

3. Date Incorporated or Qualified

5. Certificate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

Street Address (P.O. Box Number is Not Acceptable)

11/09/1995

4. FEI Number

BOCA RA	TON FL 33431	84 City	85 Zip Code					
			FL   5   5   5   5   5   5   5   5   5					
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named corporation 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. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505. Florida Statutes.								
Signature: Specific probed name of registered agreet and the chaptered agreet								
12.	OFFICERS AND DIRECTORS		TO OFFICERS AND DIRECTORS IN 12  Change Addition					
TITLE	D DELETE	1 1 THE P/S/T/D	Guange L Addition					
NAME	HERRICK, NORTON	1.2 NAME						
STREET ADDRESS	2295 CORPORATE BLVD., N.W., SUITE 222	1.3 STHEFT ADDRESS						
CITY - ST - ZIP	BOCA RATON FL 33431	1.4 CITY - ST - 7IP						
TITLE	# DELETE	2 1 TITLE VPIASI	Change Addition					
NAME	,	22 NAME HOWER & PLEASE	PI					
STREET ADDRESS		23 STREET ADDRESS 20 CMM M. TYTECE	<u>'</u>					
CITY-ST-ZIP		24 CITY-ST-ZIP MONUMER NO 0/90	00					
TITLE	DELETE	3 1 Title VP///	☐ Change ☐ Addition					
NAME		32 NAME Michael Hemit	0/ 200					
STREET ADDRESS		1.4 CITY-SI-7IP  2 1 TITLE  22 NAME  40 LARY & Hepre K  23 STREEL ADDRESS  24 CITY-SI-ZIP  31 TITLE  32 NAME  33 STREEL ADDRESS  34 CITY-SI-ZIP  BOCC FOR FL 33-	378211					
CITY-ST-7/P		34 CITY-SI-ZIP BOCE FOR FL 33-	131					
TITLE	DELEVE	4 1 TILE	Change Addition					
NAME		4.2 NAME						
STREET ADDRESS		4.3 STREET AUDRESS						
CITY+ST-ZIF		4.4 CITY - ST - ZIP						
TITLE	DELETE	5 1 TILLE	Change Addition					
NAME		5.2 NAME						
STREET ADDRESS		5.3 STREET ADDRESS						
CITY-ST-ZIP		5.4 CITY - S' - 74P						
TITLE	DELETE	6 1 TITLE	Change Addition					
NAME		62 NAME						
STREET ADDRESS		63 STREET ADDRESS						
		6.4 CHY+ST+7/P						
14. I do herek certify that	by certify that the information supplied with this fring is voluntarily turnist the information indicated on this applied report of supplemental annual rapid of the receiver or trustee on Block 12 or Block 13 if changed, or an apattaphinent with an address	empowered to execute this report as required by Chapte	tion 119.07(3)(k), Florida Statutes: Hurther have the same legal effect as if made under ir 607, Florida Statutes; and that my name					

SIGNATURE: SIGNATURE AND TYPED DI POINTED NAME OF SIGNING OFFICER OR DIRECTOR

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