SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996. AMOUNT DUE ON OR BEFORE 8/7/96: \$225 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$375.) ELORIDA DEPARTMENT OF STATE **PROFIT** CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT DIVISION OF CORPORATIONS 1996 P95000093736 (3) **DOCUMENT #** VITAL FORWARD, INC. Mailing Address Principal Place of Business 7331 N.W. 45TH STREET 7331 N.W. 45TH STREET FT. LAUDERDALE FL 33311 FT. LAUDERDALE FL 33311 3a. Date of Last Roport Date Incorporated or Qualified 12/11/1995 Applied For **FFI Number** 2a. Mail ng Address 26 ABOVE Not Applicable 26 21 \$8.75 Additional Suite, Apt. # etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 \$5.00 May Be City & State 6. Election Campaign Financing City & State Γ Added to Fees Trust Fund Contribution 28 23 8. This corporation has liability for intangible tax under s 199 032 Country $Z_{\rm IP}$ Country Z_{10} Yes No Florida Statutes 30 29 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 61 Name TILLEM, SCOTT Street Address (P.O. Box Number is Not Acceptable) 82 3284 N. STATE ROAD 7 LAUDERDALE LAKES FL 33319 83 Zip Code 85 84 City 11. Pursuant to the provisions of Sections 607.0502 and 307.1508. 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 heard of directors. Thereby accept the appointment as registered agent. Lam familiar with, and accept the obligations. Section 607.0505. Florida Statutes. CATE SIGNATURE (NOTE: Registered Agent's gratime required when remalating) Signature. Typestize printed numer of region in larger than the chapping about (3/8) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. 12. Change Addition DELETE 1.1 Title TITLE CR2E034 1.2 NAME CLARKE, CHRISTOPHER NAME 1.3 STREET ADDRESS 7331 N.W. 45TH ST. STREET ADDRESS FT. LAUDERDALE FL 33311 14 CITY - ST - ZIP CITY - ST - ZIF Change Addition DELFTE 2 1 TITLE D TITLE 2 2 NAME TAFARI, DANIEL NAME 2.3 STREET ADDRESS 7331 N.W. 45TH ST. STREET ADDRESS FT. LAUDERDALE FL 33311 2 4 CHTY - ST - ZIP CITY - ST - ZIP Change Addition DELETE 3.1.1151.6 TITLE 3.2 NAME NAME 3.3 STREET ADDRESS STREET ADDRESS 3.4 CITY - \$1 - 7IP CITY - ST - ZIP Change Addition DELETE 4.1 TUTLE TITLE 4 2 NAME NAME 4.3 STREET ADDRESS STREET ADDRESS 4.4 City - St - ZIP CITY-ST-ZiP Change Addition DELETE 5.1 THILE TITLE 5 2 NAME NAME 5.3 STREET ADDRESS STREET ADDRESS 5.4 CITY - S1 - 7IP City-St ZIP Change Addition DELETE 6.1 TITLE TITLE 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 64 CITY - ST - ZIP 14. I do hereby certify that the information supplied with this fiting is voluntarily furnished and does not qualify for the exemption stated in Section 1°9 07(3)(k). 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 onth, that I am an o'llicer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes, and that my name appears in Block 12 or \$60.k\;13 if thinned or on an attachment with an address. k 13 if philinged, or on an altrachment with an address that my name appears in Block 12

Aris Alle Arke OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

5/96 954-742-9804