FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT CORPORATION ANNUAL REPORT



Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT # P96000030682 (4)

W. MICHAEL BRINKLEY, JR., P.A.

FILED Mar 07 1997 8:00am Secretary of State



r mogar riace	CO Dusiness	Mailing Address			
2737 N.E. 2011 FT. LAUDERDA		2737 N.E. 2011H COURT FI. LAWOERDALE FL 33308	9809		
				3. Date Incorporated or Qualified 04/09/1996	d 3a. Date of Last Report
	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 1301	Bayview Drive	26 1301 Bay	view Dri	ve 65-06622'	Not Applicable
Suite, Apt. 4	#, etc. #1	Suite, Apt. #, etc.	#1	6. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	Lauderdale FL		erdale	FZ 6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24 333	304 25 Country U. S. A.	^{Zip} 33304 3	Country U.S.	Florida Statutes	or intangible tax under s. 199.032, Yes K No
	9. Name and Address of Current	Hegistered Agent	81 Name	10. Name and Address of New	Registered Agent
	NKLEY, W M JR		or Marile	same	
	7 N.E. 20TH COURT LAUDERDALE FL 33305		82 Street	Address (P.O. Box Number is Not Accept 30) Bay View Drive	
			84 City F	· · · · · · · · · · · · · · · · · · ·	85 Zip Code
				t. Lavderdale	FL 33304
office or re	e the provisions of Sections 607.0502 gristered agent, or both, in the State on tritamiliar with, and accept the obligati	if Florida. Such change was auf	thorized by the corr	corporation submits this statement for the poration's board of directors. I hereby acc	e purpose of changing its registered pot the appointment as registered
SIGNATURE _	W. Muchael Brutch	h. Presiden		J	/15/97
12.	Signature: Mixed or printed name of Tegistered agent OFFICERS AND		Registered Agent signature	required when reinstating)	FICERS AND DIRECTORS IN 12
THILE	OFFICEROARD	DELETE	1.1 TITLE	DA CAT	Change Addition
NAME		James	1.2 NAME	III Michael Rock	
STREET ADDRESS			1.3 STREET ADDRESS	W. Michael Brink	
CHY-SI 20F			1.4 CITY - ST - ZIP	Pt. Landerdale FL	33304
TITLE		DELETE	21 TITLE	11	Change Addition
NAME			2 2 NAME		
STREET ADDRESS			2.3 STREET ADDRESS		
011Y - ST - 20F			2 4 CITY - ST - ZIP		
lifict		☐ DELETE	3.1 TITLE		Change Addition
NAME			3.2 NAME		
STREET ADDRESS			3.3 STREET ADDRESS		
CHY-S1-20*			3.4. CITY - ST - ZIP		
FITLE	/	DELETE	4.1 TITLE		Change Addition
NAME			4. 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			4.4 CITY+ST-ZIP		
TITLE		☐ D€LETE	51 TITLE		Change Addition
NAME			52 NAME		
STREET ADDRESS			53 STREET ADDRESS		
CITY-ST-7P			5.4 CITY+ST-ZIP		
1001		☐ DELETE	61 TITLE		Change Addition
NAME			62 NAME		
STREET ADDRESS			63 STREET ADDRESS		
CITY-SI-7IP			64 CITY+ST-ZIP		
information	n indicated on this armual report or su	polemental angual report is true	e and accurate and	stated in Section 119.07(3)(i), Florida Statt I that my signature shall have the same le	inal effect as if made under nath: tha
Lam an of	ficer or director of the corporation or to a Block 12 or Block 13 if changed, or c	he receiver or trustee empower	ed to execute this r	report as required by Chapter 607, Florid	Statutes; and that my name
appears ir	i black iz cr block to it changed, or c	on an adachment y an an addr e	355.		