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PROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

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DOCUMENT # P9600043075 (6)

FILED Apr 08 1997 8:00am Secretary of State

Principal Plas 10320 S.W. 16 DAVIE FL 333		Mailing Address 10320 S.W. 16TH PLAC DAVIE FL 33324-7454	OE						
				3	05/21/199	orated or Qualifie	d 3a. [Date of Last P	Report
· '	Place of Business	2a. Mailing Address		4	FEI Number		d		pplied For
21		26			65	0665	736		ot Applicable
Suite, Apt	; #, etc	Suite, Apt. #, etc.		5	- Certificate o	Status Desired			Additional equired
City & Sta	ite	City & State			Flection Can	npaign Financing			May Be
23		28		"	Trust Fund C				to Fees
Zip	Country	Zip	Country	8	This corpora	tion has liability f	or intangible	e tax under s	199.032,
24	25	29	30		Florida Statu		Yes		
	9. Name and Address of Curre	nt Registered Agent	81 N). Name and	Address of New	Registered	·····	
	DERSON, DAVID F		OI N	ame Don	na L.	Horkey	r. M.	5., P	HR
	ISTER GOMEZ & GOTTFRIED, P.I	A.	82 St	reet Address	P.O. Box Num	ber is Not Acced	táble)	#31	
	2 S.E. 23RD STREET		83	450 W	Oakio	nd PK. [olva.	~ 31C	_
ri.	LAUDERDALE FL 33316								
			84 Ci	YFL 1	auderd	ماه	FI	85 <u>Zi</u> p	Code
11. Pursuant	t to the provisions of Sections 607 050	02 and 607 1508. Florida St	atutes, the above-na	med corporat	ion submits thi	s statement for th			ts registered
, u	remistered amont or both in the State	or, and our rood, monda or	atoros, the above ha	and adoption	on our new bin		anne ha an	on changing ,	registered
Unice or	registered agent, or both, in the state	e of Florida, Such change w	as authorized by the	corporation's	board of direc	itors. I nereby ac	серше вр	Population as	
ł.	t to the provisions of Sections 607.050 registered agent, or both, in the State am familiar with, and accept the oblig	e of Florida, Such change wastions of, Section 607.0505		corporation's	board of direc	ctors. I nereby ac	Cept the ap	ionimentas	1992
office or agent. I . SIGNATURE	Honnax. No	Reil.	vas authorized by the provided Florida Statutes. Donna L INOTE: Registered Agent sig	. Hork	KV_	cors. I nereby ac	April COPI (THE BIT	il 3,	1997
1	Signature, typed or printed hards of registered ag OFFICERS AN	pent and fibe of applicable ID DIRECTORS	Donna L (NOTE: Registered Agent signal) 13.	. Hork	en reinstiding)	CHANGES TO OF	CASTE	ul 3,	1997 RS IN 12
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i. I do necesy certify that the information supplied with this tiling does not quality for the exemption stated in Section 119.07(3)(j). 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 oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

Debra l Paradios Debra II Paradise

4/1/91 Date (954)424-2999 Daylirle Protect

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