FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00							FILED				
CO	PROFIT RPORATION UAL REPORT			<b>. Morth</b> ry of State	m		_				:00ai State
1997         Division of conportions           DOCUMENT #         P96000047946 (4)           1. Corporation Name         P96000047946 (4)								0100	ury		iute
		3577 JE	Mailing Address 3577 JERICHO DRIVE CASSELBERRY FL 32707-6210								
VNOGELDENN		049950	DERKT FL 327074	0210			3. Date Incorporated 05/31/1996	or Qualified	3a. Date	o of Last R	eporl
2. Principal F	Place of Business	- · · · ·	ing Address	<u></u>			4. FEI Number	021			pplied For
Suite, Apt.	. #, elc.	26 Suite	e, Apt. #. etc.				59-3384			\$8.75	ot Applicable Additional
City & Sta	le	27 City 28	8 State				<ol> <li>Certificate of Status</li> <li>Election Campaign</li> </ol>	Financing		Fee Re \$5.00	equired May Be
Zip	Country 25	29		Cour 30	lry		Trust Fund Contribu 8. This corporation ha Florida Statutos	s liability for	·······		
10	9. Name and Address of Cu	urrent Registered	Agent		1 Name		0. Name and Addres	s of New Re	gistered Ag	gent	
	Chner, Natalie 17 Jericho Drive						(P.O. Box Number is N	lal Accontai			
	SSELBERRY FL 32707					Mouress		iot Acceptat.			
					33						
					84 City				FL	85 Zip (	
	to the provisions of Sections 607 registered agent, or both, in the S		ico chando was a	es, the ab	ove-namec	corporat	ion outprite this states	ent for the p	urpose of c	hanging it	s registered
agent. La	am familiar with, and accept the o	congations of, Sec	lion 607.0505, Flo	rida Slati	by the cor tes.	poration's	s board of directors. I h	nereby accer	ot the appoi	ntment as	registered
agent. 1 a IGNATURE	am familiar with, and accept the o		lion 607.0505, Fld	rida Slat.	tes.	poration's	s board of directors. I h	nereby accer	ot the appoint	ntment as	registered
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agent, 1 a IGNATURE 2 TLE	Signature, typed or printed name of registere	ed agent and title if applie	lion 607.0505, Flo	Registered	l@S. Agent signatur F	Poration s	ADDITIONS/CHANG	ESTO OFFIC	DATE DATE ÆRS AND D	niment as	IS IN 12
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agent. 1 a IGNATURE 2. ILE ME I <u>Y-S1-2IP</u> ILE ME REET ADDRESS	Signature, typed or printed name of registere	ed agent and title if applie	lion 607.0505, Flo	Registered 13. 1.1 111 1.2 NA 1.3 STF 1.4 Cit 2.1 111 2.2 NA	tes. Agent signatur F IE E1 ADDRESS - ST - ZIP F	P P NAT 3577 CASS V LYNN 3477	ADDITIONS/CHANG ADDITIONS/CHANG ALIE LOC JERICHO SELBERRY I SMAIL 9 S. ST. LO	ESTO OFFIC HNER DR. FL 32		DIRECTOR	IN 12
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