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

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # P96000069403

ANOAI PHA INC

FILED Feb 08, 1999 8:00am **Secretary of State**

02-08-1999 90044 032 ***150.00

| ANOALI | The little | | | | | | | | | | |
|---|--|---|---|--|--|---|--|--|-------------------------------------|--|---|
| Principal Place | e of Business | Mailin | g Address | | | | | 1911 1911 WELFE WEFE | 541 4 (8 [[] 6[] | . 46186 (1); 1 48 ; | |
| ATTN: MARIA BALAZ | | | ATTN: MARIA BALAZ | | | | | | | | |
| 2439 BEE RIDGE ROAD | | | 2439 BEE RIDGE ROAD | | | | | | | | |
| SARASOTA FL 34239 | | SARAS | SARASOTA FL 34239 | | | | DO NOT WRITE IN THIS SPACE | | | | 1 |
| | | | ٠. | | | | 3. Date Incorporated or Qua 08/19/1996 | alifed | • | <u></u> | |
| 2. Principal P | lace of Business | 2a. Ma | ailing Address | | | | 4. FEI Number | | | pplied For | 1 8 |
| 21 | | 26 | | | | | 65-0694611 | | | ot Applicable | 3 |
| Suite, Apt. | #, etc. | <u> </u> | uite, Apt. #, etc. | | | | 5. Certifcate of Status Design | red 🔲 | | Additional equired | 0 |
| City & Stat | | 27 Ci | ity & State | | | ==== - | 6. Election Campaign Finar | reing | | May Be | -= |
| 23 | | 28 | ii, a oiaio | | | | Trust Fund Contribution | | | to Fees | ļ |
| Zip | Country | Zir | p | Co | untry | | 8. This corporation owes th | e current year Int | angible | | 1 |
| 24 | 25 | 29 | • | 30 | • | | Personal Property Tax. | • | ☐Yes | No | |
| 241 | 9. Name and Address of Curre | | ed Agent | 172 | 1 | | 10. Name and Address of I | New Registered | Agent | |] |
| | 8 5,435,431 | | | | 81 | Name | | | | | |
| | ALLWOOD, ROBERT T II | | | | 82 | Street Addr | ress (P.O. Box Number is Not A | ccentable) | - | MV-T | ┨. |
| | 5 STICKNEY PT ROAD | | | | | Officer Addi | 1 - Section | 5 <u>1985 - 1986 - 1985 -</u> | 41 M 018-3151 | 154159-3511751 | |
| SAR | ASOTA FL 34231 | | | | 83 | | 15台灣線標 | | | | |
| l | . • | | • | | 84 | City | | FL | 85 Zip | Code | 1 |
| | 27. 12. 6. 5 | A 7 8 5. | ***** | | 1 1 | | accation submits this statement for | <u> </u> | changing its | s registered | |
| ATTEL BEATERN | | | 4500 FL-14- CA-4 | | | | | | | | - |
| .11. Pursuant | to the provisions of Sections 607.05 | i02 and 607. e of Florida | 1508, Florida Statu Such change was | ites, the authorize | above ed by | e-named corp the corporation | on's board of directors. I hereby | or the purpose of accept the appoi | ntment as r | egistered | |
| .11. Pursuant office or r | to the provisions of Sections 607.05 registered agent, or both, in the State am familiar with, and accept the oblig | 602 and 607. e of Florida. pations of, Se | 1508, Florida Statu Such change was ection 607.0505, Fl | ites, the authorize orida Sta | above ed by i atutes. | e-named corp the corporation | on's board of directors. I hereby | or the purpose of accept the appoi | ntment as r | sgistered | |
| 11. Pursuant office or i SAP agent. I a | am familiar with, and accept the oblig | ations of, Se | ection 607.0505, FI | orida Sta | itutes. | | | | ntment as r | egistered | |
| SAS agent. I a | familiar with, and accept the oblig | pations of, Se | ection 607.0505, FI | orida Sta | atutes. | | ed when reinstating} / (1941) | DATE | | | 100 |
| Signature 12. | in familiar with, and accept the oblig Signature, typed or printed name of registered eg OFFICERS A | pations of, Se | ection 607.0505, FI | orida Sta | atutes. | | ad when reinstating} (1.05) ADDITIONS/CHANGES T | DATE | | | 60.65 |
| SAP agent. I a SIGNATURE 12. IIILE | Signature, typed or printed name of registered ag OFFICERS A | pations of, Se | ection 607.0505, FI plicable (NOT ORS | E: Registere | atutes. | | ed when reinstating} / (1941) | DATE | D DIRECT | ORS IN 12 | \$4.744.000\ |
| SIGNATURE 12. TITLE NAME | Signature, typed or printed name of registered ag OFFICERS A D BAUMGARTNER, ANDREAS | pations of, Se | ection 607.0505, FI plicable (NOT ORS | E: Registere 13 | atutes. Agent TITLE NAME | | ad when reinstating} (1.05) ADDITIONS/CHANGES T | DATE | D DIRECT | ORS IN 12 | 100%/44 (00) |
| SAPVagent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS | Signature, typed or printed name of registered eg OFFICERS A D BAUMGARTNER, ANDREAS LEOPOLDSGASE 6 1020 | pations of, Se | ection 607.0505, FI plicable (NOT ORS | E: Registers 13 1.1 1.2 1.3 1.3 1.3 1.3 1.3 1.3 1.3 1.3 1.3 1.3 | ed Agent TITLE NAME STREET | t signature require | ad when reinstating} (1.05) ADDITIONS/CHANGES T | DATE | D DIRECT | ORS IN 12 | 000000000000000000000000000000000000000 |
| SAPVagent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP | Signature, typed or printed name of registered ag OFFICERS A D BAUMGARTNER, ANDREAS | pations of, Se | ection 607.0505, FI plicable (NOT ORS | E: Registere 13 1.1 1.2 1.3.3 1.4.4 | atutes. Agent TITLE NAME | t signature require | ad when reinstating} (1.05) ADDITIONS/CHANGES T | DATE | D DIRECT | ORS IN 12 | 00000000000000000000000000000000000000 |
| SAPVagent. I a SIGNATURE 12. IIILE NAME STREET ADDRESS CITY-ST-ZIP TITLE | Signature, typed or printed name of registered ag OFFICERS A D BAUMGARTNER, ANDREAS LEOPOLDSGASE 6 1020 WEIN AUSTRIA D | pations of, Se | ection 607.0505, FI picable (NOT ORS DELETE | E: Registers 13 1.1 1.21 1.33 1.40 2.1 | atutes. add Agent B. TITLE NAME STREET CITY-ST | t signature require | ad when reinstating} (1.05) ADDITIONS/CHANGES T | DATE | ID DIRECT | ORS IN 12 | ODORON (44,000) |
| SAPVagent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | Signature, typed or printed name of registered eg OFFICERS A D BAUMGARTNER, ANDREAS LEOPOLDSGASE 6 1020 WEIN AUSTRIA D MINARIKOVA, KATRINA | pations of, Se | ection 607.0505, FI picable (NOT ORS DELETE | E: Registere 13 1.11 1.21 1.33 1.44 2.11 2.21 | atutes. ad Agent TITLE NAME STREET CITY-ST TITLE NAME | t signature require | ad when reinstating} (1.05) ADDITIONS/CHANGES T | DATE | ID DIRECT | ORS IN 12 | SOO SAN SOOTOOD |
| SAP agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS | Signature, typed or printed name of registered ag OFFICERS A D BAUMGARTNER, ANDREAS LEOPOLDSGASE 6 1020 WEIN AUSTRIA D MINARIKOVA, KATRINA LEOPOLDSGASE 6 1020 | pations of, Se | ection 607.0505, FI picable (NOT ORS DELETE | E: Registers 13 1.1' 121 1.3: 1.44 2.1' 2.21 | atutes. ad Agent TITLE NAME STREET CITY-ST TITLE NAME | t signature require ADDRESS 1-ZIP ADDRESS | ad when reinstating} (1.05) ADDITIONS/CHANGES T | DATE | ID DIRECT | ORS IN 12 | SAN KOOTOOO |
| SAPVagent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME | Signature, typed or printed name of registered eg OFFICERS A D BAUMGARTNER, ANDREAS LEOPOLDSGASE 6 1020 WEIN AUSTRIA D MINARIKOVA, KATRINA LEOPOLDSGASE 6 1020 WEIN AUSTRIA | pations of, Se | ection 607.0505, FI picable (NOT ORS DELETE | E: Registers 13 1.1' 121 1.3: 1.44 2.1' 2.21 2.3: 2.4 | atutes. ad Agent . TITLE NAME STREET TITLE NAME STREET STREET | t signature require ADDRESS 1-ZIP ADDRESS | ad when reinstating} (1.05) ADDITIONS/CHANGES T | DATE | ID DIRECT | ORS IN 12 Addition | CDDECON (44 00) |
| SAPVagent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE TITLE TITLE TITLE STATEMENT ADDRESS | Signature, typed or printed name of registered ag OFFICERS A D BAUMGARTNER, ANDREAS LEOPOLDSGASE 6 1020 WEIN AUSTRIA D MINARIKOVA, KATRINA LEOPOLDSGASE 6 1020 | pations of, Se | picable (NOT ORS DELETE | E: Registers 13 1.1* 121 1.33 1.44 2.1* 2.24 2.34 3.4 | atutes. ad Agent TITLE NAME STREET TITLE NAME STREET CITY-ST | t signature require ADDRESS 1-ZIP ADDRESS | ad when reinstating} (1.05) ADDITIONS/CHANGES T | DATE | D DIRECT | ORS IN 12 Addition | VODE (4.4.4.00) |
| SAP agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME | Signature, typed or printed name of registered eg OFFICERS A D BAUMGARTNER, ANDREAS LEOPOLDSGASE 6 1020 WEIN AUSTRIA D MINARIKOVA, KATRINA LEOPOLDSGASE 6 1020 WEIN AUSTRIA | pations of, Se | picable (NOT ORS DELETE | E: Registers 13 1.1* 121 1.33 1.44 2.1* 2.24 2.33 2.44 3.1* 3.2 | add Agent Agent | t signature require ADDRESS 1-ZIP ADDRESS | ad when reinstating} (1.05) ADDITIONS/CHANGES T | DATE | D DIRECT | ORS IN 12 Addition | ODDECON((44,000) |
| SAP agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS | Signature, typed or printed name of registered eg OFFICERS A D BAUMGARTNER, ANDREAS LEOPOLDSGASE 6 1020 WEIN AUSTRIA D MINARIKOVA, KATRINA LEOPOLDSGASE 6 1020 WEIN AUSTRIA | pations of, Se | picable (NOT ORS DELETE | E: Registers 13 1.11 1.21 1.33 1.44 2.11 2.24 3.11 3.21 3.31 3.31 | add Agent Agent | ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS | ad when reinstating) ADDITIONS/CHANGES T | DATE O OFFICERS AN | D DIRECT Change | ORS IN 12 Addition Addition | |
| SAP agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME | Signature, typed or printed name of registered eg OFFICERS A D BAUMGARTNER, ANDREAS LEOPOLDSGASE 6 1020 WEIN AUSTRIA D MINARIKOVA, KATRINA LEOPOLDSGASE 6 1020 WEIN AUSTRIA | pations of, Se | picable (NOT ORS DELETE | E: Registers 13 1.11 1.21 1.33 1.44 2.11 2.24 2.33 2.4 3.11 3.21 3.34 | address. add Agent TITLE NAME STREET TITLE NAME STREET TITLE NAME STREET STREET NAME STREET | ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS | ad when reinstating) ADDITIONS/CHANGES T | DATE | D DIRECT Change | ORS IN 12 Addition Addition | |
| SAP agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME TITLE NAME TITLE TITLE TITLE | Signature, typed or printed name of registered eg OFFICERS A D BAUMGARTNER, ANDREAS LEOPOLDSGASE 6 1020 WEIN AUSTRIA D MINARIKOVA, KATRINA LEOPOLDSGASE 6 1020 WEIN AUSTRIA | pent and title if app ND DIRECT | DELETE | E: Registers 13 1.11 1.21 1.33 1.44 2.11 2.24 3.11 3.21 3.34 4.11 | ad Agenta TITLE NAME STREET CITY-ST TITLE NAME STREET CITY-S TITLE NAME CITY-S CITY-S CITY-S CITY-S CITY-S CITY-S CITY-S CITY-S | ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS | ad when reinstating) ADDITIONS/CHANGES T | DATE O OFFICERS AN | D DIRECT Change | ORS IN 12 Addition Addition | |
| SAP agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME | Signature, typed or printed name of registered eg OFFICERS A D BAUMGARTNER, ANDREAS LEOPOLDSGASE 6 1020 WEIN AUSTRIA D MINARIKOVA, KATRINA LEOPOLDSGASE 6 1020 WEIN AUSTRIA | pations of, Se | picable (NOTORS DELETE | E: Registers 13 1.11 1.21 1.33 1.44 2.11 2.24 3.31 3.4 4.11 4.2 | ad Agent TITLE NAME STREET CITY-ST TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME NAME NAME NAME | ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS | ad when reinstating) ADDITIONS/CHANGES T | DATE O OFFICERS AN | D DIRECT Change | ORS IN 12 Addition Addition | |
| SAP agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME TITLE NAME TITLE TITLE TITLE | Signature, typed or printed name of registered eg OFFICERS A D BAUMGARTNER, ANDREAS LEOPOLDSGASE 6 1020 WEIN AUSTRIA D MINARIKOVA, KATRINA LEOPOLDSGASE 6 1020 WEIN AUSTRIA | pations of, Se | DELETE DELETE | E: Registers 13 1.11 1.21 1.33 1.44 2.11 2.24 3.11 3.21 3.34 4.11 4.2 4.33 | ad Agent TITLE NAME STREET CITY-ST TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME NAME NAME NAME | ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP | ad when reinstating) ADDITIONS/CHANGES T | DATE O OFFICERS AN | D DIRECTO Change | ORS IN 12 Addition Addition Addition | |
| SAPVAGENT. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS | Signature, typed or printed name of registered eg OFFICERS A D BAUMGARTNER, ANDREAS LEOPOLDSGASE 6 1020 WEIN AUSTRIA D MINARIKOVA, KATRINA LEOPOLDSGASE 6 1020 WEIN AUSTRIA | pent and title if eps | DELETE DELETE | E: Registers 13 1.11 1.21 1.33 1.44 2.11 2.24 3.31 3.4 4.11 4.2 4.33 4.41 5.11 | Adaptives. TITLE NAME STREET CITY-ST TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME TITLE NAME TITLE TITLE TITLE TITLE | ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP | ad when reinstating) ADDITIONS/CHANGES T | DATE O OFFICERS AN | D DIRECT Change | ORS IN 12 Addition Addition Addition | |
| SAP agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP | Signature, typed or printed name of registered eg OFFICERS A D BAUMGARTNER, ANDREAS LEOPOLDSGASE 6 1020 WEIN AUSTRIA D MINARIKOVA, KATRINA LEOPOLDSGASE 6 1020 WEIN AUSTRIA | pent and title if eps | DELETE DELETE | E: Registers 13 1.11 1.21 1.33 1.44 2.11 2.24 3.11 3.21 3.34 4.11 4.2 4.33 4.41 5.11 5.21 | ad Agent TITLE NAME STREET CITY-ST TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME NAME STREET CITY-S TITLE NAME NAME NAME NAME NAME NAME NAME NAME | ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP | ad when reinstating) ADDITIONS/CHANGES T | DATE O OFFICERS AN | D DIRECTO Change | ORS IN 12 Addition Addition Addition | |
| SAP agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP | Signature, typed or printed name of registered eg OFFICERS A D BAUMGARTNER, ANDREAS LEOPOLDSGASE 6 1020 WEIN AUSTRIA D MINARIKOVA, KATRINA LEOPOLDSGASE 6 1020 WEIN AUSTRIA | pent and title if eps | DELETE DELETE | E: Registers 13 1.11 1.21 1.33 1.44 2.11 2.24 3.1 3.2 4.1 4.1 4.2 4.3 4.4 5.1 5.2 5.3 | ad Agent TITLE NAME STREET CITY-ST TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET NAME STREET CITY-S TITLE NAME STREET STREET STREET STREET STREET STREET STREET STREET STREET | ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP | ADDITIONS/CHANGES T | DATE O OFFICERS AN | D DIRECTO Change | ORS IN 12 Addition Addition Addition | |
| SAP agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME NAME NAME NAME | Signature, typed or printed name of registered eg OFFICERS A D BAUMGARTNER, ANDREAS LEOPOLDSGASE 6 1020 WEIN AUSTRIA D MINARIKOVA, KATRINA LEOPOLDSGASE 6 1020 WEIN AUSTRIA | pent and title if eps | DELETE DELETE DELETE | E: Registers 13 1.11 1.21 1.33 1.44 2.11 2.24 3.11 3.21 3.34 4.11 4.2 4.33 4.41 5.11 5.22 5.33 5.44 | ad Agent TITLE NAME STREET CITY-ST TITLE NAME STREET CITY-S TITLE NAME STREET TITLE NAME STREET | ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP | ad when reinstating) ADDITIONS/CHANGES T | DATE O OFFICERS AN | □ Change □ Change □ Change □ Change | ORS IN 12 Addition Addition Addition Addition | |
| SAP agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS | Signature, typed or printed name of registered eg OFFICERS A D BAUMGARTNER, ANDREAS LEOPOLDSGASE 6 1020 WEIN AUSTRIA D MINARIKOVA, KATRINA LEOPOLDSGASE 6 1020 WEIN AUSTRIA LEOPOLDSGASE 6 1020 WEIN AUSTRIA | pent and title if eps | DELETE DELETE | E: Registers 13 1.11 1.21 1.33 1.44 2.11 2.24 3.1 3.2 3.3 3.4 4.1 4.2 4.3 4.4 5.1 5.2 5.3 5.44 6.1 | ad Agent TITLE NAME STREET CITY-ST TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET NAME STREET CITY-S TITLE NAME STREET CITY-SI TITLE NAME STREET TITLE NAME | ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP | ADDITIONS/CHANGES T | DATE O OFFICERS AN | D DIRECTO Change | ORS IN 12 Addition Addition Addition Addition Addition | |
| SAP agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP | Signature, typed or printed name of registered eg OFFICERS A D BAUMGARTNER, ANDREAS LEOPOLDSGASE 6 1020 WEIN AUSTRIA D MINARIKOVA, KATRINA LEOPOLDSGASE 6 1020 WEIN AUSTRIA | pent and title if eps | DELETE DELETE DELETE | E: Registers 13 1.11 1.21 1.33 1.44 2.11 2.21 2.33 2.4 3.4 3.4 3.4 4.1 4.2 4.33 4.4 5.1 5.2 5.33 5.44 6.1 | ad Agent TITLE NAME STREET CITY-ST TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET CITY-SI TITLE NAME STREET CITY-SI TITLE NAME NAME STREET CITY-SI TITLE NAME NAME NAME NAME NAME NAME | ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP ADDRESS T-ZIP | ADDITIONS/CHANGES T | DATE O OFFICERS AN | □ Change □ Change □ Change □ Change | ORS IN 12 Addition Addition Addition Addition | |
| SAP agent. I a SIGNATURE 12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE | Signature, typed or printed name of registered ag OFFICERS A D BAUMGARTNER, ANDREAS LEOPOLDSGASE 6 1020 WEIN AUSTRIA D MINARIKOVA, KATRINA LEOPOLDSGASE 6 1020 WEIN AUSTRIA LEOPOLDSGASE 6 1020 WEIN AUSTRIA | pent and title if eps | DELETE DELETE DELETE | E: Registers 13 1.1' 1.2 1.33 1.4' 2.1' 2.24 3.4' 3.4' 4.1' 4.2 4.3: 4.4' 5.1' 5.2 5.34' 6.1' 6.2: | ad Agent TITLE NAME STREET CITY-ST TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET CITY-S TITLE NAME STREET CITY-SI TITLE NAME STREET CITY-SI TITLE NAME NAME STREET CITY-SI TITLE NAME NAME NAME NAME NAME NAME | ADDRESS T-ZIP | ADDITIONS/CHANGES T | DATE O OFFICERS AN | □ Change □ Change □ Change □ Change | ORS IN 12 Addition Addition Addition Addition Addition | |

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 consection 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 charges of a light transmitted by the same legal effect as if made under oath; that I am an officer or director of the consection 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 charges of the consection of the consection