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

**PROFIT CORPORATION** ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

P96000076209 (1)

ADVATECH RESEARCH AND DEVELOPMENT, INC.

**FILED** Jun 17 1998 8:00am Secretary of State



| City & State  Ci  | Principal Place of Business  |  | Mailing Address                 |                            |                    | r constant nim notin motts Abtil manit malit ukata dilila tibili abili taki |                        |                                       |  |
|---|--|--|---------------------------------|----------------------------|--------------------|---|------------------------|---------------------------------------|--|
| 2. Principal Place of Rusiness 2. Mailing Address (GCCTCOD BIGHTM) 2. Principal Place of Rusiness 2. Mailing Address (GCCTCOD BIGHTM) 4. FE NUTTON 4. FE NUTTON 5. Conflicted of State 1. Purton 5. Conflicted of State 1. Purton 5. Conflicted of State 1. Purton 6. Co  | 20147 NORTHEAST 15TH COURT   |  | 20147 NORTHEAST 15TH COURT      |                            |                    |   |                        |                                       |  |
| 2. Principal Piace of Business 2. Moning Address (GCCCOUR BIGHTAN 2. 177.7 S. PAGLER D  | NORTH MIAMI BEACH FL 33179   |  | NORTH MIAMI BEACH FL 33179      |                            |                    | DO NOT WRITE IN THIS SOME   |                        |                                       |  |
| 2. Making Address OCCCTON BIGHTAN 4. FEN Ambies   Application   Applicat  |  |  |                                 |                            | -                  |   | IN THIS SPACE          |                                       |  |
| 2. Maing Address 90 GCC008 13 Hamber 4 SEE Number 5 See Not Applicable for 17 S. PAGLER Dr. S. Conflictant of Statis Desired 5 See Required 6 See Req  |  |  |                                 |                            |                    | •   |                        |                                       |  |
| Suite Apt #: etc   Suite Apt #    | 2. Principal P   | lace of Business                                     | 28. Mailing Address Vol         | 2000 Pigu                  | المها              |   | TAN                    | nlied For                             |  |
| Suits April 4 of 20 2 Suits April 4 of 20 2 Suits April 100 F as 1 Toward 6 Continuation Composition   S5.75 Addition   S5.75 Addition   S5.70 May Be Addition   State   State  | 21   |  |                                 |                            |                    | ・/ ゲー 人へ・! へ つ / / **   |                        | · · · · · · · · · · · · · · · · · · · |  |
| The companies of Status Country   Status   Sta    |  |  |                                 |                            | , ,                | - \$8.75 /  | <del></del>            |                                       |  |
| City & State    City & State  | 22   |  | $rac{1}{2}$                     | s East 1                   | Davad              | Certificate of Status Desired   | 1 1 7 -                |                                       |  |
| Added to Fees 20   20   20   33   40   30   40   50   50   50   50   50   50   5  |  | e  |                                 | 7                          | 27                 | 6. Election Campaign Financing  | \$5.00                 | May Ro                                |  |
| CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301  82 Single Auguss (P.O. Box Number is Not Acceptable) 11. Pursuant to the provisions of Sections 607,0502 and 607,1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing list registered agent. I. an Health of Florids, Such change was authorized by the corporation submits this statement for the purpose of changing list registered diffice or registerion agent. Let help, in the foliate of Florids, Such change was authorized by the corporations submits this statement for the purpose of changing list registered diffice or registerion agent. Let help, in the foliate of Florids, Such change was authorized by the corporations board of directors. I hereby accept the appointment as registered agent. Let help with the foliate of Florids Such changes.  SIGNATURE  12. OF Incitis AiND DIRECTORS  13. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12  14. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12  15. ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12  16. Third SNYOER, GEORGE  20147 NORTHHEAST 15TH COURT  15. STREET ADDRESS  20147 NORTHHEAST 15TH COURT  15. STREET ADDRESS  20147 NORTHEAST 15TH COURT  25. STREET ADDRESS  25. STREET ADDRESS  26. STREET   | 23   |  | 28 WAST Freem                   | Beach T                    | <u>-</u> ر         | , -   |                        |                                       |  |
| CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301  30 Surge   1000 - East   Tower 31 Surge   1000 - East   Tower 32 Surge   1000 - East   Tower 33 Surge   1000 - East   Tower 34 Surge   1000 - East   Tower 35 Surge   1000 - East   Tower 36 Surge   1000 - East   Tower 37 Surge   1000 - East   Tower 38 Surge   1000 - East   10  | Zip  | Country  | Zip                             | Country                    |                    | 8. This corporation owes or has paid  | the current year Inte  | angible                               |  |
| CORPORATION SERVICE COMPANY 1201 HAYS STREET TALLAHASSEE FL 32301  82 Stock Address (P.O. Box Number is Not Adoptisple)  11. Pursuant to the provisions of Scotlars 207 0500 and 807 1500. Finds Statutes, the adversarial statutes of the provision of agent, an inchination of the provisions of period of the company of the c  | 24   |  |                                 | 30 USA                     |                    |   |                        | ] No                                  |  |
| 11. Pursuant to the provisions of Sections 607,0502 and 607,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, and hope of the corporations submits this statement for the purpose of changing its registered office or registered agent, and hope of the corporation submits this statement for the purpose of changing its registered office or registered agent, and hope of the corporation submits this statement for the purpose of changing its registered office or registered agent, and hope of the corporations board of directors. I hereby accept the appointment as registered agent, and hope of the corporations board of directors. I hereby accept the appointment as registered agent, and hope of the corporations board of directors. I hereby accept the appointment as registered agent, and hope of the corporations board of directors. I hereby accept the appointment as registered agent, and hope of the corporations board of directors. I hereby accept the appointment as registered agent, and hope of the corporations board of directors. I hereby accept the appointment as registered agent, and hope of the corporations board of directors. I hereby accept the appointment as registered agent, and hope of the corporations board of directors. I hereby accept the appointment as registered agent, and hope of the corporations board of directors. I hereby accept the appointment as registered agent, and hope of the corporations board of directors. I hereby accept the appointment as registered agent, and hope of the corporations are possible agent, and hope of   |  |  |                                 |                            |                    |   |                        |                                       |  |
| TALLAHASSEE FL 32301  82 Stage Addisos (P.O. Box Number is Not Acceptable)  83 Stage 1100 — East Tower  84 Gives Reach FL 185 \$10,000  11. Pursuant to the provisions of Sections 607-6502 and 607-1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in this State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered signature in the purpose of changing its registered signature in the corporation's board of directors. I hereby accept the appointment as registered signature in the corporation's board of directors. I hereby accept the appointment as registered signature r | CONFINATION SERVICE COMPAINT   |  |                                 |                            |                    |   |                        |                                       |  |
| TALLAHASSEE FL 32301    Suff   IDO - EAST TOWER   | 1201 HAYS STREET 82 Street Add:  |  |                                 |                            |                    |   |                        |                                       |  |
| 11. Pursuant to the provisions of Socions 602,0502 and 607,1508, Florida Statutos, the above named corporation submits this statement of the purpose of changing air registered agent. Lam the Clate of Iterate, Stud change was authorized by the corporations submits this statement of the purpose of changing air registered agent. Lam the Clate of Iterate, Stud change was authorized by the corporations submits this statement of the purpose of changing air registered agent. Lam things grant and accept the originations of Specifical Statutos.  ISGNATURE    12.   | TA   | LLAHASSEE FL 32301                                   |                                 | 150                        | outh FLAGLER Drive |   |                        |                                       |  |
| 11. Pursuant to the provisions of Socions 607.0502 and 607.1509, Florids Statutes. Be above named corporation submits this statement for the purpose of changing at segistered agent, or both, in the State of Horids, Such change was authorized by the corporations submits this statement for the purpose of changing at segistered agent. Laminary with and accorpt the objective displaced of, Socion 607.0506, Florids Statutes.  SIGNATURE  SIGNATURE  SIGNATURE  SIGNATURE  OF LEFE AND DIRECTORS  OF LEFE AND DIRECTORS  OF LEFE AND DIRECTORS IN 12.  TITLE  PD  OF LEFE AND DIRECTORS  ON NOTHERAST 15TH COURT  NORTH MIAMI BEACH FL 33179  THE CEO  SINVER, GEORGE  20147 NORTHEAST 15TH COURT  NORTH MIAMI BEACH FL 33179  DELETE  22 NAME  33 SIRET ADDRESS  ON'S-1-7P  NORTH MIAMI BEACH FL 33401  DELETE  33 SIRET ADDRESS  ON'S-1-7P  ONTH HAGER DRIVE #1100  34 CITY-SI-7P  TITLE  VCD  ONTH HAGER DRIVE #1100  ONTH HAGER DRIVE #100  ONTH HAGER DRIVE #1100  ONTH HAGER DRIVE #110  | 83   |  |                                 |                            |                    | Man - Fac- 7  | TOWNE O                |                                       |  |
| 11. Pursuant to the provisions of Socions 602.0502 and 607.1508. Florids Statutos, the above amend corporation submits this statement of the purpose of changing at registered office or registered agent. Lam the State of Itorida, Studies of Itorida Statutos.  SIGNATURE  SIGNATURE  OF LECENS AND DIRECTORS  TILE  PD  OF LECENS AND DIRECTORS  TILE  PD  OF LECENS AND DIRECTORS IN 12  TILE  OF LECENS AND DIRECTORS IN 12  TILE  DELETE  1.3 STREET ADDRESS  OT 1.4 STATE I ADDRESS  OT 1.5 JP  TILE  OC 1.0 DELETE  2.1 TILE  OC 1.0 DELETE  2.1 TILE  OC 1.0 DELETE  2.1 TILE  OC 1.0 DELETE  3.1 TILE   |  |  |                                 | 84 Gity                    | 45                 | 1100 - cast 1   |                        | 2000                                  |  |
| 11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Florida Statutos, the above-named corporation submits this statement for the purpose of changing ate registered agent. I am familiary with and accord they objective to be compared to the compared that they are the provisions of the compared to the comp  |  |  |                                 |                            | ะรา                | Palm Beach  | FL B 33                | Ŷο̈́\                                 |  |
| SIGNATURE    Signature   Signa  | 11. Pursuant t   | to the provisions of Sections 607.0502               | and 607,1508, Florida Statute   | s, the above-named         | corpora            | ation submite this statement for the nu                                     | rpose of changing its  | s registered                          |  |
| SIGNATURE    PO   | omice or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. Lam familiar with and accept the obligations of, Section 607.0505, Florida Statutes. |  |                                 |                            |                    |   |                        |                                       |  |
| 12. OF LICE IS AND DIRECTORS IN 12  TITLE PD SAPE THE CONTROL OF C  |  |  |                                 |                            |                    |   |                        |                                       |  |
| TITLE SPYDER, GEORGE SOUTH FLAGUER TO THE TOTAL STREET ADDRESS CITY-ST-ZIP NORTH MIAMI BEACH FL 33179  TOTAL CEO SHOPER, GEORGE SOUTH MIAMI BEACH FL 33179  TOTAL CEO SHOPER, GEORGE STREET ADDRESS CITY-ST-ZIP  TOTAL CEO SHOPER, GEORGE STREET ADDRESS CITY-ST-ZIP  TOTAL CEO SHOPER, GEORGE STREET ADDRESS CITY-ST-ZIP  TOTAL CEO SHOPER GEORGE STREET ADDRESS SHOPER GEORGE  |  | Signature, typod or printed name of registered agent | and title if applicable (NOTE   | Registered Agent signature | е годыгед у        | when reinstating)   | DATE                   |                                       |  |
| NAME SNYDER, GEORGE 12 NAME 13 STREET ADDRESS 20147 NORTH MIAMI BEACH FL 33179 14 CITY-ST-ZIP NORTH MIAMI BEACH FL 33179 1711E CEO SOUTH MIAMI BEACH FL 33179 1712 1713 1714 1715 1715 1716 1716 1717 1717 1717 1717  | · · · · · · · · · · · · · · · · · · ·  |  |                                 | 13.                        | <u>.</u>           | ADDITIONS/CHANGES TO OFFICE   |                        | S IN 12                               |  |
| STREET ADDRESS CITY-ST-ZPP MORTH MIAMI BEACH FL 33179  MILE CEO SUPER GEORGE STREET ADDRESS CITY-ST-ZPP MORTH MIAMI BEACH FL 33179  DELETE STREET ADDRESS CITY-ST-ZPP MORTH MIAMI BEACH FL 33179  DELETE STREET ADDRESS CITY-ST-ZPP MORTH MIAMI BEACH FL 33179  DELETE STREET ADDRESS CITY-ST-ZPP MORTH MIAMI BEACH FL 33401  STREET ADDRESS CITY-ST-ZPP MORTH MIAMI BEACH FL 33401  STREET ADDRESS CITY-ST-ZPP MORTH MIAMI BEACH FL 33401  STREET ADDRESS CITY-ST-ZPP MORTH MIAMI BEACH FL 33179  DELETE STREET ADDRESS CITY-ST-ZPP MORTH MIAMI BEACH FL 33179  A4 CITY-ST-ZPP MORTH MIAMI BEACH FL 33179  A4 CITY-ST-ZPP MORTH MIAMI BEACH FL 33179  A5 CITY-ST-ZPP MORTH MIAMI BEACH FL 33179  A5 CITY-ST-ZPP  DELETE STREET ADDRESS CITY-ST-ZPP  A4 CITY-ST-ZPP  DELETE STREET ADDRESS CITY-ST-ZPP  DELETE STREET ADDRESS CITY-ST-ZPP  A4 CITY-ST-ZPP  DELETE STREET ADDRESS STREET ADDRESS STREET ADDRESS CITY-ST-ZPP  A4 CITY-ST-ZPP  DELETE STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS CITY-ST-ZPP  A4 CITY-ST-ZPP  DELETE STREET ADDRESS STREET ADD  | 1  |  | X DEFELE                        | 1.1 TITLE                  |                    |   | Change                 | Addition                              |  |
| CITY-ST-ZIP  NORTH MIAMI BEACH FL 33179  TITLE  CEO  SNYDER, GEORGE  SNYDER, GEORGE  SOLITA NORTHEAST 15TH COURT  22 NAME  SNYDER, GEORGE  SOLITA NORTH MIAMI BEACH FL 33179  TITLE  VCD  NAME  NORTH MIAMI BEACH FL 33179  DELETE  31 TITLE  VCD  NAME  RICHMAN, GERALD F  777 SOUTH FLAGLER DRIVE #1100  33 STREET ADDRESS  CITY-ST-ZIP  TITLE  V  DELETE  41 TITLE  V  SPEIGEL, MICHAEL  20147 NORTHEAST 15TH COURT  42 NAME  SPEIGEL, MICHAEL  20147 NORTHEAST 15TH COURT  43 STREET ADDRESS  20147 NORTH MIAMI BEACH FL 33401  44 CITY-ST-ZIP  TITLE  NORTH MIAMI BEACH FL 33179  DELETE  51 TITLE  NORTH MIAMI BEACH FL 33179  TITLE  DELETE  51 TITLE  NAME  52 NAME  53 STREET ADDRESS  CITY-ST-ZIP  DELETE  51 TITLE  NAME  53 STREET ADDRESS  CITY-ST-ZIP  NORTH MIAMI BEACH FL 33179  Addition  ADDRESS  | NAME   |  |                                 | 1.2 NAME                   |                    |   |                        |                                       |  |
| TITLE CEO NAME SANDER, GEORGE STREET ADDRESS OTHY-ST-ZIP NORTH MIAMI BEACH FL 33179  TITLE VCD NAME RICHMAN, GERALD F TOTA SOUTH FLAGLER DRIVE #1100 STREET ADDRESS TOTY-ST-ZIP NORTH MIAMI BEACH FL 33401  DELETE TITLE VCD NAME RICHMAN, GERALD F TOTA SOUTH FLAGLER DRIVE #1100 STREET ADDRESS TOTY-ST-ZIP NORTH MIAMI BEACH FL 33401  DELETE TITLE VCD NAME SPEIGEL, MICHAEL STREET ADDRESS TOTY-ST-ZIP NORTH MIAMI BEACH FL 33401  DELETE STREET ADDRESS TOTY-ST-ZIP NORTH MIAMI BEACH FL 33179  DELETE STREET ADDRESS TOTY-ST-ZIP NORTH MIAMI BEACH FL 33179  DELETE STREET ADDRESS TOTY-ST-ZIP NORTH MIAMI BEACH FL 33179  DELETE STREET ADDRESS TOTY-ST-ZIP NORTH MIAMI BEACH FL 33179  DELETE STREET ADDRESS TOTY-ST-ZIP NORTH MIAMI BEACH FL 33179  DELETE STREET ADDRESS TOTY-ST-ZIP NORTH MIAMI BEACH FL 33179  DELETE STREET ADDRESS TOTY-ST-ZIP  TOTO DELETE STREET ADDRESS TOTY-ST-ZIP  Addition TOTO DELETE STREET ADDRESS TOTY-ST-ZIP  TOTO D  |  |  |                                 | 1.3 STREET ADDRESS         |                    |   |                        |                                       |  |
| NAME STREET ADDRESS 20147 NORTHEAST 15TH COURT CITY-ST-ZIP NORTH MIAMI BEACH FL 33179  DELETE 31THE VCD NAME RICHMAN, GERALD F 777 SOUTH FLAGLER DRIVE #1100 33 STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH FL 33401 34 CITY-ST-ZIP THE V DELETE 41 THE V DELETE 41 THE 42 NAME SREET ADDRESS CITY-ST-ZIP NORTH MIAMI BEACH FL 33179  DELETE 51 THE 52 NAME 53 STREET ADDRESS 61TY-ST-ZIP THE DELETE 51 THE 51 THE 52 NAME 53 STREET ADDRESS 53 STREET ADDRESS 53 STREET ADDRESS 63 STREET ADDRESS 64 CITY-ST-ZIP THE NAME 52 NAME 53 STREET ADDRESS 63 STREET ADDRESS 63 STREET ADDRESS 63 STREET ADDRESS 63 STREET ADDRESS 64 CITY-ST-ZIP THE NAME 54 NAME 55 NAME 56 STREET ADDRESS 65 STREET ADDR  |  |  |                                 | 1.4 CITY-ST-ZIP            |                    | *   |                        |                                       |  |
| STREET ADDRESS CITY-ST-ZIP NORTH MIAMI BEACH FL 33179  TITLE VCD DELETE 31 TITLE VCD NAME RICHMAN, GERALD F 777 SOUTH FLAGLER DRIVE #1100 STREET ADDRESS CITY-ST-ZIP WEST PALM BEACH FL 33401 34 CITY-ST-ZIP TITLE V DELETE 41 TITLE V DELETE 41 TITLE V DELETE 41 TITLE V DELETE 51 TITLE DEL  |  |  | DECETE                          | 2.1 TITLE                  |                    |   | L Change               | Addition                              |  |
| CITY-ST-ZIP NORTH MIAMI BEACH FL 33179 2 4 CITY-ST-ZIP  TITLE NCD  NAME RICHMAN, GERALD F 32 NAME  STREET ADDRESS  CITY-ST-ZIP  WEST PALM BEACH FL 33401 34 CITY-ST-ZIP  TITLE  V DELETE 41 TITLE  SPEIGEL, MICHAEL 4.2 NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NORTH MIAMI BEACH FL 33179 4.4 CITY-ST-ZIP  TITLE  DELETE 5.1 TITLE  STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE 5.1 TITLE  DELETE 5.1 TITLE  DELETE 6.1 TITLE  DELETE 6.1 TITLE  DELETE 6.1 TITLE  DELETE 6.1 TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE 6.1 TITLE  DEL  | NAME   |  |                                 | 2.2 NAME                   |                    |   |                        |                                       |  |
| TITLE VCD GRICHMAN, GERALD F STREET ADDRESS T77 SOUTH FLAGLER DRIVE #1100 33 STREET ADDRESS TITLE V GRICHMAN GERALD F TITLE C GRICHMAN GERALD F TITLE C GRICHMAN GERALD F TITLE GRICHM  | STREET ADDRESS   |  |                                 | <u>.</u>                   |                    |   |                        |                                       |  |
| NAME STREET ADDRESS CITY-S1-ZIP WEST PALM BEACH FL 33401  TITLE V DELETE 4.1 TITLE V SPEIGEL, MICHAEL STREET ADDRESS CITY-S1-ZIP NORTH MIAMI BEACH FL 33179  DELETE 5.1 TITLE NAME STREET ADDRESS CITY-S1-ZIP TITLE DELETE 6.1 TITLE 6.1 TITLE DELETE 6.1 TITLE DELETE 6.2 NAME STREET ADDRESS CITY-S1-ZIP TITLE DELETE 6.3 STREET ADDRESS CITY-S1-ZIP TITLE DELETE 6.4 CITY-S1-ZIP 4.4 CITY-S1-ZIP 4.5 CHange Addition Addition NAME STREET ADDRESS CITY-S1-ZIP ADDRESS CITY-S1-ZIP ADDRESS STREET ADDRESS STREET ADDRESS CITY-S1-ZIP ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS STREET ADDRESS ADDRESS STREET ADDRESS STRE  |  |  |                                 |                            | _                  |   |                        |                                       |  |
| TREET ADDRESS TOTY-ST-ZIP WEST PALM BEACH FL 33401 33 STREET ADDRESS TITLE V STREET ADDRESS TOTY-ST-ZIP NORTH MIAMI BEACH FL 33179  TITLE NAME STREET ADDRESS CITY-ST-ZIP NORTH MIAMI BEACH FL 33179  TITLE NAME STREET ADDRESS CITY-ST-ZIP  STREET ADDRESS CITY-ST-ZIP  DELETE S1 TITLE S1 STREET ADDRESS CITY-ST-ZIP  DELETE S1 TITLE S1 STREET ADDRESS CITY-ST-ZIP  TITLE S1 STREET ADDRESS CITY-ST-ZIP  S1 STREET ADDRESS CITY-ST-ZIP  TITLE S1 STREET ADDRESS CITY-ST-ZIP S1 STREET ADDRESS S1 STREET ADDRESS S1 STREET ADDRESS CITY-ST-ZIP S1 STREET ADDRESS S1 STREET ADDRESS S1 STREET ADDRESS CITY-ST-ZIP S1 STREET ADDRESS STREET ADDRESS STREET ADDRESS S1 STREET ADDRESS S1 STREET ADDRESS ST  |  |  | L_J DELETE                      |                            | P.                 | D   | Change                 | Addition                              |  |
| CITY-ST-ZIP  WEST PALM BEACH FL 33401  34 CITY-ST-ZIP  ITILE  V SPEIGEL, MICHAEL  41 TITLE  42 NAME  43 STREET ADDRESS  CITY-ST-ZIP  NORTH MIAMI BEACH FL 33179  TITLE  DELETE  51 TITLE  52 NAME  52 NAME  53 STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  64 TITLE  DELETE  63 STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  64 TITLE  DELETE  64 CITY-ST-ZIP  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 in the receiver or trustee employers to group term under appears in officer or director of the corporation or the receiver or trustee employers to ground by Chapter 80. Florida Statutes. I further 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 officer or director of the corporation or the receiver or trustee employers of the corporation or the receiver or trustee employers of the corporation or the receiver or trustee employers of the corporation or the receiver or trustee employers of the corporation or the receiver or trustee employers of the corporation or the receiver or trustee employers in the and accurate and that my signature shall have the same legal effect as if made under coath; that I am an appears in   |  |  |                                 | 3 2 NAME                   | '                  |   |                        | 1                                     |  |
| TITLE  SPEIGEL, MICHAEL  A2 STREET ADDRESS  CITY-ST-ZIP  NORTH MIAMI BEACH FL 33179  TITLE  DELETE  51 TITLE  STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  61 TITLE  NAME  52 NAME  53 STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  64 TITLE  Addition  |  |  | 1100                            | 3.3 STREET ADDRESS         |                    |   |                        |                                       |  |
| NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP STREET ADDRESS STREE  |  | WEST PALM BEACH FL 33401                             | To pourse                       |                            |                    |   |                        | 171                                   |  |
| STREET ADDRESS  20147 NORTHEAST 15TH COURT  4.3 STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  5.1 TITLE  STREET ADDRESS  CITY-ST-ZIP  DELETE  5.4 CITY-ST-ZIP  TITLE  DELETE  6.1 TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  6.3 STREET ADDRESS  6.3 STREET ADDRESS  CITY-ST-ZIP  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 supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that I am fin officer or director of the receiver or trusted empowered to execute this report as required by Chapter 607. Florida Statuters and that my signature shall have the same legal effect as if made under cast; that I am fin officer or director of the receiver or trusted empowered to execute this report as required by Chapter 607. Florida Statutes and that my name appears in   | - 1  | V Abriori Highlan                                    | ☐ NUTFUE                        |                            | V, I               | D   | Change                 | <b>≰</b> J Addition                   |  |
| TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  5.1 TITLE  5.2 NAME  5.2 NAME  5.3 STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  6.1 TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  1.1 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 of the receiver or trustee empowered to execute this report as required by Chapter 607. Florida Statutes and that my name appears in 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  |  |  | IDT                             |                            | '                  |   |                        |                                       |  |
| TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  5.1 TITLE  5.2 NAME  5.3 STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  6.1 TITLE  Addition  Addition  Change  Addition  Addition  CHANGE  CITY-ST-ZIP  1.1 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 corporation or the receiver or trustee empowered to execute this report as required by Chapter 607. Florida Statutes: and that my name appears in  |  |  |                                 |                            |                    |   |                        | ļ                                     |  |
| NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  5.4 CITY-ST-ZIP  5.4 CITY-ST-ZIP  1.1 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 cart; 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  |  | NUKTH MIAMI BEAUM FL 3317                            |                                 |                            | ļ                  | · · · · · · · · · · · · · · · · · · ·                                       | T 1 6.                 | 144.00                                |  |
| STREET ADDRESS  CITY-ST-ZIP  TITLE  DELETE  5.4 CITY-ST-ZIP  5.4 CITY-ST-ZIP  5.4 CITY-ST-ZIP  Change Addition  6.2 NAME  - 06/04/3801033007  6.3 STREET ADDRESS  CITY-ST-ZIP  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 oarl; 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   |  |  | LT DELETE                       |                            |                    |   | ∟ Change               | ☐ Addition                            |  |
| CITY-ST-ZIP  5.4 CITY-ST-ZIP  5.4 CITY-ST-ZIP  6.1 TITLE  6.2 NAME  6.2 NAME  6.3 STREET ADDRESS  CITY-ST-ZIP  6.4 CITY-ST-ZIP  6.4 CITY-ST-ZIP  6.5 STREET ADDRESS  6.4 CITY-ST-ZIP  1.4 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 cart; 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  |  |  |                                 |                            |                    |   |                        |                                       |  |
| TITLE  NAME  6.2 NAME  6.2 NAME  6.3 STREET ADDRESS  CITY-ST-ZIP  14. Thereby 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 of 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   |  |  |                                 |                            |                    |   |                        |                                       |  |
| NAME  STREET ADDRESS  CITY-ST-ZIP  14. Thereby 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 of director of the corporation or the receiver or trustee employered to execute this report as required by Chapter 607. Florida Statutes: and that my name appears in   |  |  | DELETE                          |                            | <u> </u>           |   | [ ] OL                 | A 2 210                               |  |
| 6.3 STREET ADDRESS  ***3(1). (1)  14. Thereby 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 of 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   |  |  | □ DETEIF                        |                            |                    | 0000002547  | Change                 | L. Addition                           |  |
| 6.3 STREET ADDRESS  ***3(1). (1)  14. Thereby 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 of 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   |  |  |                                 |                            |                    | -06/04/9801033  | ⊱ōō7 /                 | 1 /                                   |  |
| 14. 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 eath; that I am an officer of 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  | 1  |  |                                 | 1                          |                    | ***300.00   | (1                     | D I M                                 |  |
| 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 eath; 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  | <del> </del>   | ertify that the information a washed with            | this blins door not qualify for |                            | nd in Co           |   | AL 12 CAMP 1 40 - 4 41 | <b>Y</b>                              |  |
| 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  | indicated (  | <b>on this</b> annual report or supplemental a       | mnual report is true and accur  | rate and that my sig       | nature s           | shall have the same legal effect as if m                                    | rade under oath: thai  | llam an                               |  |
|   |  |  |                                 |                            |                    |   |                        |                                       |  |