FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00 **PROFIT** FILED FLORIDA DEPARTMENT OF STATE CORPORATION Sandra 🍇 Mortham ANNUAL REPORT Secretary of State 97 MAY -6 PM 1:49 1997 DIVISION OF CORPORATIONS SECRETARY OF STATE TALLAHASSEE, FLORIDA DOCUMENT # P96000078786 CAVAIOVOSULAY BOLLOON ASSISTANCE 5900 NW 14TH COURT, FORT LAUDERDALE, 3. Date Incorporated or Qualified 3a. Date of Last Report FLORIDA 333/3 9-20-96 NONE 2. Principal Place of Business 2a. Mailing Addre Applied For ABOVE 65-0707430 Not Applicable Suite Apt. #, etc. Suite Apt # etc \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 23 Country Country Zib 8. This corporation has liability for intangible tax under s. 199,032, 11 USA USA Florida Statutes Yes XNo 29 24 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent LARRY WOLFE 81 Name RAY GUOLFE Street Address (P.O. Box Number is Not Acceptable) 200-A JOHN KNOX ROAD TALLA HASSEE, FL 30303-6643 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, 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. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes. SIGNATURE alian Type dior pented name of registered agent and atteil applicable (NOTE Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. (96/6) CHIEF EXECUTIVE OFFICER DELETE PRESIDENT 1.1 TITLE ☐ Change ★ Addition TITIE PIERRE CADET COURT JOHN INGRAM 14170 HARPERS FER DAVIE FL 333 VICE PRESIDENT JOE GENNARO 1.2 NAME MALSE 1.3 STREET ADDRESS STREET ADJIBLISS FURT GUIDERDALE FL 33313 1.4 CITY-ST-ZIP CHY-ST 705 DELETE 2.1 TITLE 101° F 2.2 NAME NAME 14120 HARPERS FERRY ST 2.3 STREET ADDRESS STREET ADDRESS DAVIE , FL 33375 2 4 CITY-ST-ZIP $C(0, \boldsymbol{r} \cdot \boldsymbol{S}^{1} \cdot 20)$ Change Addition 1000 3 1 TITLE 00002178306--7 \ -05/14/97--01076--006 3.2 NAME NAME STREET ALORS AS 3.3 STREET ADDRESS ****165,00 ****165.00 3.4 CITY-ST-ZIP CITY ST 7 5 DELETE Change Addition 4.1 TITLE HI.F 4 2 NAME

52 NAME 1.414 5.3 STREET ADDRESS STREET ADDRESS 5 4 CITY - \$1 - ZIP Diffy St. 76 DELETE Change Addition UH 61 TITLE 62 NAME 0.654 6.3 STREET ADDRESS SIF LOAD BEG 6.4 CiTY-ST-7IP 14. I din hereby certly that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the information excitated on this annual report or supplicitiental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I arrive office or director of the exponation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Brock 12 of Brock 13 of changes, your mattactionent with an address. NAME OF SIGNING OFFICER OR DIRECTOR

4.3 STREFT ADDRESS

Change

Addition

4.4 CITY-ST-ZIP

5 1 TITLE

DELETE

SCHELL ADDRESS

E-FY-SY-ZII:

11-14