Strice Aquit e., etc.         26         Inter Applic         Inter Applic           City & State         27         Strice Apt #, etc.         5. Certificate of Status Desired         \$87,75 Applicate           City & State         28         Country         6. Election Compaign Financing         \$5,000 May Beg           Zip         Country         7.0         Country         8. This compaign Financing         \$5,000 May Beg           Zip         Country         8. This compaign Financing         \$5,000 May Beg         Added to Fees           Zip         26         29         30         Finance And Address of Current Registered Agent         10. Name and Address of New Registered Agent           MARK, CLIFFORD B         100 SO BSCAVIE BLVD. STE 1101         41         Name         10. Name and Address of New Registered Agent           MARK, CLIFFORD B         100 SO BSCAVIE BLVD. STE 1101         41         Name         10. Name and Address of Current Registered Agent           MARK, CLIFFORD B         100 SO BSCAVIE BLVD. STE 1101         52         52         72         000           MARK, CLIFFORD B         100 SO BSCAVIE BLVD. STE 1101         52         63         100         100 SO BORD His States (FO Cooperation's board of directors. I hereby accept the edge/aginds         100 SO Cooperation's board of directors. I hereby accept the edge/aginds         1	PROFIT CORPORATION ANNUAL REPORT <b>1997</b>	<b>S</b>	A DEPARTMENT OF STATE indra B. Mortham Secretary of State ON OF CORPORATIONS		997 8:00ar ary of State
Mi FL 33131     MAM FL 33131-2005       Princ (ad Prace of Reserves)     2a. Making Address       State, Apt A, etc.     2a. Making Address       City & State     State, Apt A, etc.       27     State, Apt A, etc.       28     State, Apt A, etc.       29     State, Apt A, etc.       20     Control       29     State, Apt A, etc.       20     Control       29     State, Apt A, etc.       20     Control       21     Control       22     Control       28     The State Control       29     State       29     State       20     This concretion has liability for intangible kin under a. 1980.0       30     Find State       31     Control       4     State       70     Control       30     State       31     Control       40     State       41     Name and Address of Current Registered Agent       42     Oto State       42     State       43     State       44     City Class Address of Scoters BD7.0602 and E07.1603. State Address (P O. Box Number is Not Acceptable)       44     City Class Address       45     State Address (P O. Box Number is Not Acce	B HOLDINGS AND INVES	TMENT COMPANY			
12/17/1996       Principal Prace of Praveres     28       Safe, Apr. 4, etc.     28       Safe, Apr. 4, etc.     8. Certification of Status Desired       City & State     70       City & State     8. Certification of Status Desired       Principal Prace     70       City & State     8. Certification of Status Desired       Principal Prace     70       City & State     70       City & State     70       Country     8. This corporation has liability for intangible tax under s. 190.03       Principal State Apple     70       28     30       Principal State Apple       29     30       Principal State Apple       29     30       Principal State Apple       29     30       Principal State Apple       20     30       21     22       33     30       22     30       23     State Apple       24     Chrone and Address of Current Registered Apant       25     State Apple       26     Current State Apple </th <th></th> <th></th> <th></th> <th></th> <th></th>					
State, Apt. B, etc.     28       State, Apt. B, etc.     27       State, Apt. B, etc.     27       City & State     City & State       City & State     State, Apt. B, etc.       28     Country       29     20       20     Country       21     State, Apt. B, etc.       22     20       23     Country       29     20       20     Double State       21     Country       22     State, Apt. B, etc.       23     Country       24     Child State       25     State, Apt. B, etc.       26     Country       27     Country       28     State, Apt. B, etc.       29     30       20     Do So Disconter Gold State App. Interdistic State App. Interdistic				· ·	Sa. Date of Last Report
ande, Ays #, Pd:     Suite, Ays #, etc.     6. Certificate of Status Desired     \$6.75 Action Free Required       21y & Schie     City & Statue     6. Election Campaign Financing     \$5.00 May Be Trust Fund Contribution     Added to Fees 10.0 Name and Address of Current Registered Agent       HARK, CLIFFORD B 100 SO DISCAYNE BLVD. STE 1101     61 Name     10. Name and Address of New Registered Agent       HARK, CLIFFORD B 100 SO DISCAYNE BLVD. STE 1101     61 Name       Function of the preventies of Scatters 607 (KO2 and 607 LISG). Fordid Statutes. It is statute with the statement for the preventies of Scatters 607 (KO2 and 607 LISG). Fordid Statutes. The above name of corporation submits this statement for the preventies of Scatters 607 (KO2 and 607 LISG). Fordid Statutes. The above name of corporation submits this statement for the preventies of Scatters 607 (KO2 and 607 LISG). Fordid Statutes. The above name of corporation submits this statement for the preventies of Scatters 607 (KO2 and 607 LISG). Fordid Statutes. The above name of corporation submits this statement for the preventies of Scatters 607 (KO2 and 607 LISG). Fordid Statutes.       NATURE     Chi to chi status and accept the chigatories of Scatter degree and accept the chigatories of Scatter above name and Address for OFFICERS. AND DIFECTORS IN 12 and accept the chigatories of Scatter above name accept the chigatories of Scatter above name accept the chigatories of Scatters 607 (KO2 and 607 LISG). Fordid Statutes.       NATURE     Differ to chigatories of Scatters 607 (KO2 and 607 LISG). Fordid Statutes.     OCH Inspande Apertegrate register appression and board of directors. Hereby accept the appointment is register apression.       NATURE     Differ to	norpal Place of Business		0 <b>SS</b>		Applied For
aty & State       21	ile, Apt. #, etc.	· · · · · · · · · · · · · · · · · · ·	etc.	Contificate of Dist in Disclored	CA 75 Additional
20     Country     20     Trust Fund Contribution     Added to Frees       25     29     30     Front Structure     40 More set Structure     199 COUNTRY       25     29     30     Front Structure     100 Structure     199 COUNTRY       9     0. Name and Address of Current Registered Agent     10. Name and Address of New Registered Agent     10. Name and Address of New Registered Agent       HARK, CLIFFORD B     10     Struct Address (P.O. Box Number is Not Acceptable)     10       MAMI FL 33131     82     Street Address (P.O. Box Number is Not Acceptable)       Maxin FL 33131     83     10     100 Structure       10     Struct Address (P.O. Box Number is Not Acceptable)     10       Wessent to the preventions for Address of Fords Statutes, the above named corporation submits this statement for the prevention of both on the State of Fords Statutes, the above named corporation submits this statement for the appointment as register care and accept the cologitations of Scatton 600 Stotes 600 S	Nr & Stalo			· · · · · · · · · · · · · · · · · · ·	Fee Required
25       29       30       Florida Statutes       10, Name and Address of New Registered Agent         HARK, CLIFFORD B 100 SO RISCATNE BLVD. STE 1101       10, Name and Address of New Registered Agent       10, Name and Address of New Registered Agent         MAMI FL 33131       2       Street Address (P.O. Box Number is Not Acceptable)         Maximum for the provedence of Sectors 607.000 and 607.1508, Fonda Statutes, the above-nemed corporation submits this statement for the purpose of changing its registered agent or box, in the State of Fronta Statutes, the above-nemed corporation's board of directors. I hereby accept the appointment as registered agent or box, in the State of Fronta Statutes, the above-nemed corporation's board of directors. I hereby accept the appointment as registered agent or box, in the State of Fronta Statutes.         ALUE       0       COI I CERS AND DIFE CLORS       13       ADDITIONS/CHANGES TO OFFICERS AND DIFECTORS IN 12         COI I CERS AND DIFE CLORS       0       DELETE       13 THE       Change       Addites of Change and Agent agritation agent provide agent p	yo olaic				
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DD SCATVICE BLD. STE 1101       82       Street Address (P.O. Box Number is Not Acceptable)         B4       City       FL       85       Zip Code         B4       City       FL       B5       Zip Code       Zip Code         B4       City       FL       B5       Zip Code       Zip Code       Zip Code       Zip Code       Zip Code       Zip Code	9. Name and Address				
MANI FL 33131     as       Index Address (FL)     City       Index Address (FL)     Exclose 607.07:00 and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its register face or register agent or both in the State of Florina. Such change was autorized by the corporation's board of directors. Thereby accept the appointment as register gent and accept the collegations of Soction 607.0505, Florida Statutes.       ALUHE     City     EL       Backers tare to protection appoint and the digitations of Soction 607.0505, Florida Statutes.     Interesting to the digitations of Soction 607.0505, Florida Statutes.       ALUHE     City     EL       Backers tare to protection and index of the digitation.     (NOTE Registered Agent agrates registed when rendating)       Of Inter tare to protect agent ind the digitation.     (NOTE Registered Agent agrates registed when rendating)       Of SOUTH BISCAYNE BLVD. STE 1101     Interesting to the digitation of the dig		CTE 1101			
Bit     City     FL     Bs     Zip Code       Aureural to the provisions of Sectores 607.05.02 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register if and backen the obligations of Sectore Subch change was authorized by the corporation's board of directors. Thereby accept the appointment its register instant with and accept the obligations of Sectore 607.0505, Florida Statutes.       ALUER     OH ICE RS AND DIRE CLORE     13.     ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12       Device to protect protection protection protection in the change		SIE TIVI	82 Street Ad	dress (P.O. Box Number is Not Acceptab	le)
Lussent in the processions of Sections 607.0560° and 607.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its register great in both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accord the appointment as register great in and accord the colligations of Section 607.0505, Florida Statutes. ALURE	MIMMITL OO IO I				
ATURE bester the transition of representation of the diary braches (NOTE Registered Agent a gendule required when reinfalling) DATE CIFICE RS AND DIFFE CTORS IN 12 CIFICE RS AND CIFICE RS AND DIFFE CTORS IN 12 CIFICE RS AND CIFICE RS AND DIFFE CTORS IN 12 CIFICE RS AND CIFI	minani FL oo io i T		83		<u></u>
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MIAMI FL 33131       14 CITY-ST-7IP         DELETE       21 TITLE         22 NAME       23 STREET ADDRESS         24 CITY-ST-ZIP       Change         DELETE       31 TITLE         24 DIY-ST-ZIP       Change         ADORESS       33 STREET ADDRESS         33 STREET ADDRESS       34 CITY-ST-ZIP         Change       Ad         ADORESS       34 CITY-ST-ZIP         DELETE       31 TITLE         34 CITY-ST-ZIP       Change         Ad CITY-ST-ZIP       Change         ADORESS       34 CITY-ST-ZIP         Change       Ad         ADORESS       34 CITY-ST-ZIP         Change       Ad         DELETE       31 TITLE         35 STRET ADDRESS       ADORESS         36 ZIP       DELETE         DELETE       41 TITLE         42 NAME       43 STREET ADDRESS         51 ZP       DELETE         Change       Ad         Change       Ad         Change       Ad         ADORESS       STREET ADDRESS         51 ZP       Change         ADORESS       STREET ADDRESS         51 ZP       Change    <	Parsuant to the provisions of Secto If ce or registered agent, or both, gent, tam familiar with, and accop ATURE Signame typed or protectamic OFF	Preparent agent met title of applicable FICE RS AND DIRECTORS	da Statutes, the above-named co ge was authorized by the corpor 0505, Florida Statutes. (NOTE: Registered Agent sgneture reg 13.	uired when reinstating)	DATE DATE DATE DATE DATE DATE DATE DATE
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do hereby certily that the information supplied with this being does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the	Arswant to the provisions of Sector If ce or registered agent, or both, gent 4 am familiar with and accor ATURE Signature gend or protections OF ADURESS 1-20 ADURESS 1-20 ADURESS 1-20 ADURESS 1-20 ADURESS	regedered agent institue of applicable FICE RS AND DIRE CTORS  DEI  NE BLVD. STE 1101  DEI  DEI  DEI  DEI  DEI  DEI  DEI  DE	B4     City       Ja Statutes, the above-named coge was authorized by the corpor 0505, Florida Statutes.       (NOTE: Registered Agent synature registered Address       LETE     1.1 TITLE       12 NAME     13 STREET ADDRESS       24 City-ST-ZiP     24 City-ST-ZiP       LETE     31 TITLE       32 NAME     33 STREET ADDRESS       34 City-ST-ZiP       LETE     4.1 TITLE       4 3 STREET ADDRESS       34 City-ST-ZiP       LETE     5.1 TITLE       5.2 NAME       6.3 STREET ADDRESS       5.4 City-ST-ZiP       LETE     6.1 TITLE       6.2 NAME       6.3 STREET ADDRESS       5.4 City-ST-ZiP       LETE     6.1 TITLE	ADDITIONS/CHANGES TO OFFIC	FL