COF ANNU	PROFIT RPORATION JAL REPORT 1999		FEE AFTER MAY 1ST IS \$550.00 FLORIDA DEPAF TMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS		FILED Apr 28, 1999 8:00 am Secretary of State 04-28-1999 90038 014 ***158.75			
	MENT # P	9600010	02649					
BRAD J.	WILKUS & ASS	ociates, inc.						
Principal Pla >	e of Business		Mailing Address		· (8074)0007 119 (0110 0714) 0704) 0	UNI DUIUL NUHL UUN	I TURI I DILI I	1818 1811 1891
680 Southwi Oca Raton'	EST-15 STREET FL 33486		1680 SOUTHWEST 15 STRE BOCA RAPON FL 33486	ET				
	1		ľ		DO NOT WE 3. Date Incorporated or Qualifed	ITE IN THIS SP	ACE	
-	\checkmark				01/01/1997			
	lace of Business		2a. Mailing Address		4. FEI Nur iber			lied For
Suite, Ap1.	<u>NW 115</u>	WAY 2	6 <u>320 NU</u> Suite, Apt. #, etc.	IS WAY	65-07 14488		Not \$8.75 A	Applicable
Suite, Api.	π, Glu.	2	7		5. Certifca e of Status Desired	<u>× </u>	Fee Rec	
City & Stat			City & State		6. Election Campaign Financing		\$5.00 N	
Zip	AL SPRING		B CORALSPR	Country FL	Trust Fund Contribution S. This corporation owes the cui	rent vear lr tang	Added to ible	-ees
1 633		5 k 2		30 USA	Personal Property Tax.		Yes l]No
		ress of Current Reg	gistered Agent	94 blanc	10. Name and Address of New	Registerec Age	ent	
AME	RILAWYER CHARTE	FRED		⁸¹ Name P	and J Wilkus	<u> </u>		
	ALMERIA AVENUE	· · ·		82 Street Adr	Ress (P.O. Box Number is Not Acception NU) 115 WA			
COP	AL GABLES FL 331	34		83				
				1 1				
/				84 City		E 1 ¹⁸	35 Zip C	
	to the provisions of So	tions 607 0502 and	607 1508 Elorida Statut		ORAL SPRINGS		330	enistered
1. Pursuant office or r	to the provisions of Se egistered agent, or bot m familiar with, and ac	tions 607.0502 and th, in the State of Florent the obligations	1 607.1508, Florida Statut orida. Such change was a of. Section 607.0505, Flo		poration submits this statement for the		inging its r	enistered
office or r agent. I a	egistered agent, or bot m familiar with, and ac	th, in the State of Fic ept the obligations (1)	of, Section 607.0505, Flo	es, the above-named corr thorized by the corporat ida Statutes.	poration submits this statement for the ion's board of directors. I hereby account of directors are account of the statement	PI_ e purpose cf cha pot the appointm 4 2	inging its r	enistered
office or r agent. I a SIGNATURE	egistered agent, or bot m familiar with, and ac Signature, typed or printer name	th, in the State of Flo ept the obligations	of, Section 607.0505, Flo Sector 607.0505, Flo Sector (NOTE) Me if applicable. (NOTE)	es, the above-named corr thorized by the corporal ida Statutes.	poration submits this statement for the ion's board of directors. I hereby account of directors are account of the statement	PI_ e purpose cf cha ept the appointm 4 2 DATE	ent as reg	e gistered istered 7 1
office or r agent. I a SIGNATURE 2.	egistered agent, or bot m familiar with, and ac Signature, typed or printer name	th, in the State of Fic ept the obligations (1)	of, Section 607.0505, Flo Sector 607.0505, Flo Sector (NOTE) Me if applicable. (NOTE)	es, the above-named corr thorized by the corporat ida Statutes.	poration submits this statement for the ion's board of directors. I hereby account of directors are account of the statement	FIL e purpose c c cha pot the appointm 4 2 DATE FFICERS AND D	ent as reg	e gistered is:tered 1 1 1 1 1 1 1 1 1 1 1 2
office or r agent. I a IGNATURE 2. TLE	egistered agent, or bot m familiar with, and ac signature, typed or printer nar PSTD WILKUS, BRAD J	th, in the State of FIG epit the obligations for registered agent and to OFFICERS AND DI	orida. Such change was a of, Section 607.0505, Flo Sector Rectors	Registered Agent signature requi	poration submits this statement for the ion's board of directors. I hereby account of directors are account of the statement	FIL e purpose c c cha pot the appointm 4 2 DATE FFICERS AND D	ent as reg	e gistered is tered 1 1 1 1 1 1 1 1 1 1 1 2
office or r agent. I a IGNATURE IGNATURE ILE ILE IREET ADORESS	egistered agent, or bot m familiar with, and ac signature, typed or printer nai PSTD WILKUS, BRAD J 1680 SOUTHWES	th, in the State of FIG epit the obligations for registered agent and the OFFICERS AND DI	orida. Such change was a of, Section 607.0505, Flo Sector Rectors	es, the above-named con thorized by the corporal ida Statutes. Registered Agent signature requi 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS	poration submits this statement for the ion's board of directors. I hereby account of directors are account of the statement	FIL e purpose c c cha pot the appointm 4 2 DATE FFICERS AND D	ent as reg	e gistered is tered 1 1 1 1 1 1 1 1 1 1 1 2
office or r agent. a IIGNATURE 2. TLE AME TREET ADORESS TY-ST-ZIP	egistered agent, or bot m familiar with, and ac signature, typed or printer nar PSTD WILKUS, BRAD J	th, in the State of FIG epit the obligations for registered agent and the OFFICERS AND DI	orida. Such change was a of, Section 607.0505, Flo Sector Rectors	Registered Agent signature requi	poration submits this statement for the ion's board of directors. I hereby account of directors are account of the statement	FI_ a purpose of chan appt the appointm <u>4</u> DATE FFICERS AND D	ent as reg	egistered i::tered 7 1 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
office or r agent. a IGNATURE: 2. TLE WIE TREET ADORESS TY-ST-ZIP TLE	egistered agent, or bot m familiar with, and ac signature, typed or printer nai PSTD WILKUS, BRAD J 1680 SOUTHWES	th, in the State of FIG epit the obligations for registered agent and the OFFICERS AND DI	orida. Such change was a of, Section 607.0505, Flo Section 607.0505, Flo We if applicable. (NOTE RECTORS	es, the above-named con thorized by the corporal ida Statutes. Registered Agent signature requi 13. 1.1 TITLE 1 2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	poration submits this statement for the ion's board of directors. I hereby account of directors are account of the statement	FI_ a purpose of chan appt the appointm <u>4</u> DATE FFICERS AND D	Inging its reg	egistered i::tered 7 1 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
office or r agent. a IGNATURE: 2. TLE IME TREET ADORESS TY-ST-ZIP TLE WME	egistered agent, or bot m familiar with, and ac signature, typed or printer nai PSTD WILKUS, BRAD J 1680 SOUTHWES	th, in the State of FIG epit the obligations for registered agent and the OFFICERS AND DI	orida. Such change was a of, Section 607.0505, Flo Section 607.0505, Flo We if applicable. (NOTE RECTORS	es, the above-named con thorized by the corporal ida Statutes. Registered Agent signature requi 13. 1.1 TITLE 1 2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE	poration submits this statement for the ion's board of directors. I hereby account of directors are account of the statement	FI_ a purpose of chan appt the appointm <u>4</u> DATE FFICERS AND D	Inging its reg	egistered i::tered 7 1 2 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3
office or r agent. a IGNATURE: 2. TLE ME ?REET ADORESS TV-ST-ZIP TLE WME REET ADDRESS TREET ADDRESS	egistered agent, or bot m familiar with, and ac signature, typed or printer nai PSTD WILKUS, BRAD J 1680 SOUTHWES	th, in the State of FIG epit the obligations for registered agent and the OFFICERS AND DI	srida. Such change was a of, Section 607.0505, Flo section 607.0505, Flo RECTORS	es, the above-named con thorized by the corporal ida Statutes. Registered Agent signature requi 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	poration submits this statement for the ion's board of directors. I hereby account of directors are account of the statement	FI_ a purpose of char appt the appointm <u>4</u> DATE FFICERS AND I	Inging its reg	e gistered ixtered
office or r agent. a IGNATURE: 2. TLE MME ?REET ADDRESS TV-ST-ZIP TLE MME REET ADDRESS TY-ST-ZIP TREET ADDRESS TY-ST-ZIP TREET ADDRESS	egistered agent, or bot m familiar with, and ac signature, typed or printer nai PSTD WILKUS, BRAD J 1680 SOUTHWES	th, in the State of FIG epit the obligations for registered agent and the OFFICERS AND DI	orida. Such change was a of, Section 607.0505, Flo Section 607.0505, Flo We if applicable. (NOTE RECTORS	es, the above-named con ithorized by the corporal ida Statutes. Registered Agent signature requi 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE	poration submits this statement for the ion's board of directors. I hereby account of directors are account of the statement	FI_ a purpose of char appt the appointm <u>4</u> DATE FFICERS AND I	Inging its reg	e gistered ixtered
office or r agent. a IGNATURE 2. TLE WME REET ADDRESS TY-ST-ZIP TLE TY-ST-ZIP TLE TY-ST-ZIP TLE AME	egistered agent, or bot m familiar with, and ac signature, typed or printer nai PSTD WILKUS, BRAD J 1680 SOUTHWES	th, in the State of FIG epit the obligations for registered agent and the OFFICERS AND DI	srida. Such change was a of, Section 607.0505, Flo section 607.0505, Flo RECTORS	es, the above-named con thorized by the corporal ida Statutes. Registered Agent signature requi 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	poration submits this statement for the ion's board of directors. I hereby account of directors are account of the statement	FI_ a purpose of char appt the appointm <u>4</u> DATE FFICERS AND I	Inging its reg	e gistered ixtered
office or r agent. a IGNATURE: 2. TLE VME REET ADDRESS TV: ST-ZIP TE VME REET ADDRESS TY: ST-ZIP TLE VME REET ADDRESS TY-ST-ZIP TLE VME REET ADDRESS REET ADDRESS	egistered agent, or bot m familiar with, and ac signature, typed or printer nai PSTD WILKUS, BRAD J 1680 SOUTHWES	th, in the State of FIG epit the obligations for registered agent and the OFFICERS AND DI	srida. Such change was a. of, Section 607.0505, Flo Control (NOTE RECTORS DELETE DELETE DELETE	es, the above-named con ithorized by the corporal ida Statutes. Registered Agent signature requi 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME	poration submits this statement for the ion's board of directors. I hereby account of directors are account of the statement	FI_	Inging its reg	e gistered ixtered
office or r agent. a treat treat add treat	egistered agent, or bot m familiar with, and ac signature, typed or printer nai PSTD WILKUS, BRAD J 1680 SOUTHWES	th, in the State of FIG epit the obligations for registered agent and the OFFICERS AND DI	srida. Such change was a of, Section 607.0505, Flo section 607.0505, Flo RECTORS	es, the above-named con ithorized by the corporal ida Statutes. Registered Agent signature requi 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE	poration submits this statement for the ion's board of directors. I hereby account of directors are account of the statement	FI_	Inging its reg	e gistered ixtered
office or r agent. a agent. a agent. a agent. a lGNATURE: 2. LE WME REET ADORESS TY-ST-ZIP TLE WME REET ADORESS TY-ST-ZIP TLE MME REET ADORESS TY-ST-ZIP TLE MME REET ADORESS TY-ST-ZIP TLE MME WME	egistered agent, or bot m familiar with, and ac signature, typed or printer nai PSTD WILKUS, BRAD J 1680 SOUTHWES	th, in the State of FIG epit the obligations for registered agent and the OFFICERS AND DI	srida. Such change was a. of, Section 607.0505, Flo Control (NOTE RECTORS DELETE DELETE DELETE	es, the above-named con ithorized by the corporal ida Statutes. Registered Agent signature requi 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME	poration submits this statement for the ion's board of directors. I hereby account of directors are account of the statement	FI_	Inging its reg	e gistered ixtered
office or r agent. a IGNATURE: 2. 	egistered agent, or bot m familiar with, and ac signature, typed or printer nai PSTD WILKUS, BRAD J 1680 SOUTHWES	th, in the State of FIG epit the obligations for registered agent and the OFFICERS AND DI	srida. Such change was a. of, Section 607.0505, Flo Control (NOTE RECTORS DELETE DELETE DELETE	es, the above-named con ithorized by the corporal ida Statutes. Registered Agent signature requi 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS	poration submits this statement for the ion's board of directors. I hereby account of directors are account of the statement	FI_	Inging its reg	e gistered ixtered
AGRICE OF F agent. a agent. a	egistered agent, or bot m familiar with, and ac signature, typed or printer nai PSTD WILKUS, BRAD J 1680 SOUTHWES	th, in the State of FIG epit the obligations for registered agent and the OFFICERS AND DI	srida. Such change was a. of, Section 607.0505, Flo Control (NOTE RECTORS DELETE DELETE DELETE	es, the above-named con ithorized by the corporal ida Statutes. Registered Agent signature requi 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME	poration submits this statement for the ion's board of directors. I hereby account of directors are account of the statement	FI_ a purpose of of an spt the appointm <u>4</u> DATE FFICERS AND I	Inging its reg	e gistered ixtered
office or r agent. a agent. a cliGNATURE: 2. TLE MME TREET ADORES S TY-ST-ZIP TLE AME TREET ADDRES S TY-ST-ZIP TLE AME TREET ADDRES S TY-ST-ZIP TLE TREET ADORES S TY-ST-ZIP TLE	egistered agent, or bot m familiar with, and ac signature, typed or printer nai PSTD WILKUS, BRAD J 1680 SOUTHWES	th, in the State of FIG epit the obligations for registered agent and the OFFICERS AND DI	srida. Such change was a f, Section 607.0505, Flo rectored for applicable. (NOTE RECTORS DELETE DELETE DELETE DELETE DELETE DELETE	es, the above-named con ithorized by the corporal ida Statutes. Registered Agent signature requi 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME	poration submits this statement for the ion's board of directors. I hereby account of directors are account of the statement	FI_ a purpose of of an spt the appointm <u>4</u> DATE FFICERS AND I	Inging its reg	e gistered ixtered
office or r agent. a signATURE: 2. TLE MME TREET ADORES S TY-ST-ZIP TLE AME TREET ADDRES S TY-ST-ZIP TLE AME TREET ADDRES S TY-ST-ZIP TLE AME TREET ADDRES S TY-ST-ZIP	egistered agent, or bot m familiar with, and ac signature, typed or printer nai PSTD WILKUS, BRAD J 1680 SOUTHWES	th, in the State of FIG epit the obligations for registered agent and the OFFICERS AND DI	srida. Such change was a f, Section 607.0505, Flo rectored for applicable. (NOTE RECTORS DELETE DELETE DELETE DELETE DELETE DELETE	es, the above-named con ithorized by the corporal ida Statutes. Registered Agent signature requi 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS	poration submits this statement for the ion's board of directors. I hereby account of directors are account of the statement	FI_ a purpose of of an spt the appointm <u>4</u> DATE FFICERS AND I	Inging its reg	e gistered ixtered
office or r agent. a SIGNATURE: 2. TLE AME TREET ADORES S TY-ST-ZIP TLE AME TREET ADDRES S TY-ST-ZIP TLE AME TREET ADDRES S TY-ST-ZIP TLE AME TREET ADDRES S TY-ST-ZIP	egistered agent, or bot m familiar with, and ac signature, typed or printer nai PSTD WILKUS, BRAD J 1680 SOUTHWES	th, in the State of FIG epit the obligations for registered agent and the OFFICERS AND DI	srida. Such change was a f, Section 607.0505, Flo rectored for applicable. (NOTE RECTORS DELETE DELETE DELETE DELETE DELETE DELETE	es, the above-named con ithorized by the corporal ida Statutes. Registered Agent signature requi 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME	poration submits this statement for the ion's board of directors. I hereby account of directors are account of the statement	FI_ a purpose of of an spt the appointm <u>U</u> <u>Date</u> FFICERS AND I	Inging its reg	e gistered istered 7 1
office or r agent. a SIGNATURE: [2. ITLE AME TREET ADORES S ITY-ST-ZIP ITLE AME TREET ADDRES S ITY-ST-ZIP ITLE AME TREET ADDRES S ITY-ST-ZIP ITLE AME TREET ADDRES S ITY-ST-ZIP ITLE AME TREET ADDRES S ITY-ST-ZIP ITLE	egistered agent, or bot m familiar with, and ac signature, typed or printer nai PSTD WILKUS, BRAD J 1680 SOUTHWES	th, in the State of FIG epit the obligations for registered agent and the OFFICERS AND DI	rida. Such change was a of, Section 607.0505, Flo RECTORS DELETE DELETE DELETE DELETE DELETE DELETE	es, the above-named con ithorized by the corporal ida Statutes. Registered Agent signature requi 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4. CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	poration submits this statement for the ion's board of directors. I hereby account of directors are account of the statement	FI_ a purpose of of an spt the appointm <u>U</u> <u>Date</u> FFICERS AND I	I Change	e gistered ixtered
office or r agent. a SIGNATURE: [2, ITLE AME TREET ADORES S ITY-ST-ZIP ITLE AME TREET ADDRES S ITY-ST-ZIP ITLE AME TREET ADDRES S ITY-ST-ZIP ITLE AME TREET ADDRES S ITY-ST-ZIP ITLE AME TREET ADDRES S ITY-ST-ZIP ITLE AME	egistered agent, or bot m familiar with, and ac signature, typed or printer nai PSTD WILKUS, BRAD J 1680 SOUTHWES	th, in the State of FIG epit the obligations for registered agent and the OFFICERS AND DI	rida. Such change was a of, Section 607.0505, Flo RECTORS DELETE DELETE DELETE DELETE DELETE DELETE	es, the above-named con ithorized by the corporal ida Statutes. Registered Agent signature requi 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE	poration submits this statement for the ion's board of directors. I hereby account of directors are account of the statement	FI_ a purpose of of an spt the appointm <u>U</u> <u>Date</u> FFICERS AND I	I Change	e gistered ixtered
SIGNATURE: SIGNATURE: 12. ITLE IAME ITREET ADDRESS ITY-ST-ZIP ITLE IAME ITREET ADDRESS ITY-ST-ZIP ITLE	egistered agent, or bol m familiar with, and ac Signature, typed or printed near PSTD WILKUS, BRAD J 1680 SOUTHWES BOCA RATON FL	th in the State of FIG a ept the obligations of registered agent and ()FFICERS AND DI T 15 STREET 33486	Srida. Such change was a of, Section 607.0505, Flo RECTORS DELETE DELETE DELETE DELETE DELETE DELETE DELETE	es, the above-named con ithorized by the corporal ida Statutes. Registered Agent signature requi 13. 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4. CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 5.4 CITY-ST-ZIP	poration submits this statement for the ion's board of directors. I hereby account of directors account of directors account of the interval o		Inging its reg	e gistered ixtered
office or r agent. a IGNATURE: 2. TLE WE REET ADORESS TY-ST-ZIP TLE WE REET ADDRESS TY-ST-ZIP TLE WE REET ADDRESS TY-ST-ZIP TLE WE REET ADDRESS TY-ST-ZIP TLE WE REET ADDRESS TY-ST-ZIP TLE WE REET ADDRESS TY-ST-ZIP TLE WE REET ADDRESS TY-ST-ZIP TLE WE	egistered agent, or bol m familiar with, and ac Signature, typed or printer nar PSTD WILKUS, BRAD J 1680 SOUTHWES BOCA RATON FL	th, in the State of FIG ept the obligations of registered agent and OFFICERS AND DI T 15 STREET 33486	s filing does not qualify for	es, the above-named con ithorized by the corporal ida Statutes. Registered Agent signature requi 13. 1.1 ITILE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 ITILE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 ITILE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 ITILE 4.2 NAME 4.3 STREET ADDRESS 3.4 CITY-ST-ZIP 5.1 ITILE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 ITILE 6.2 NAME 6.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 1.4 CITY-ST-ZIP	poration submits this statement for the ion's board of directors. I hereby account of directors are account of the statement	Image: Plane in the appropriate of the approxime of the appr	Inging its reg	e gistered istered 3 3 3 3 3 3 3 3 1N 12 3 4 4 dition 4 4 4 dition 4 4 4 dition 4 4 4 dition