Companie Name Companies SINC. SIE ENTERPRISES INC. UNITED AND ADDRESS INC. UNITED ADDRESS INC. UNITED AND ADDRESS INC. UNITED ADDRESS	PROFIT CORPORATION ANNUAL REPOR 1999		FLORIDA DEPART Kathering Secretary DIVISION OF CC	MENT OF STATE Harris of State	FIL Apr 20, 199 Secretary 04-20-1999 9020	99 8:00 am of State
DSI ENTERPRISES INC.	OCUMENT #	P98000033	3978			
		NC.				
Note: Mailing Address Mailing Address 307 St 207 St 207 307 St 207 MAIL PL 3328 Principal Place of Business Za Mailing Address C.S. Path Incorporated or CostMined State, Act. R. etc. State, Ac	••••••••••••••••			~		
Bit D AV Ste 307 <	incipal Place of Business	Ma	iling Address			
AF, S015 Dot MAIL FL S016 Principal Place of Business In. Mailing Address In. Mailing Address In. Mailing Address 28 Suite, Apt. R, etc. Suite, Apt. R, etc. Scatta of Status Desired Applied For NC Applied For 20 Suite, Apt. R, etc. Control V Status of Status Desired Status Applied For NC Applied For 21 City & State Control V Status of Status Desired Status Applied For NC Applied For 210 Country In. Best conception over the current year intraveling Acced of Fees 210 Country In. Bane and Address of Current Registered Agent In. Name and Address of Name Status Of Name Applied For 91 Status For On Outh Tast Fand Controlocition over the current year intraveling Acced of Fees 91 Name and Address of Current Registered Agent In. Name and Address of Name Registered Agent Acced of Fees 91 Name and Address of Current Registered Agent In. Name and Address of Name Registered Agent In. Name and Address of Name Registered Agent In. Name and Address of Name Registered Agent 91 Name Int Address of Current Registered Agent In. Name and Address of Name Registered Agent In. Name and Address of Name Registered Agent 91 Name Int Address of Name Registered Agent In. Name and Address of Name Registered Agent In. Name an	O NW 72 AVE					
Principal Place of Business 2a. Mailing Address 4. FEI Number Applied For Suite. Apt. 4., etc. 2a Suite. Apt. 4., etc. 5. Cartificate of Status Dellind 7a. Applied For City & State 2a Suite. Apt. 4., etc. 5. Cartificate of Status Dellind 7a. Applied For City & State 2b Country 5. Cartificate of Status Dellind 7a. Applied For Zip Country 2b State and Address of Current Registered Agent 1a. Name and Address of Current Registered Agent 1b. Name State Address of Current Registered Agent 1b. Name Name State Address of Nove Registered Agent State Address of Nove Registered Agent 1b. Name Name State Address of Nove Registered Agent State Address of Nove Registered Agent 1b. Name Name State Address of Nove Registered Agent State Address of Nove Registered Agent 1b. Name 1b. Name State Address of Nove Registered Agent State Address of Nove Registered Agent 1b. Name Name And Address of Nove Registered Agent 1b. Name Address of Nove Registered Agent State Address of Nove Registered Agent 1b. Name Address of Nove Registered Agent 1b. Name Address of Nove Registered Agent 1b. Name Address of Nove Regi	E 307 IMI FL 33126	-				
Principal Place of Business Ia. Mailing Address FEI Number Applied For Suile, Apt. F, etc. Suile, Apt. F, etc. Suile, Apt. F, etc. Cory & Status Desired Status Application CDV A Status 20 Country Status Application Status Desired Status Application CDV A Status 20 Country Status Desired Status Desired Status Application 20 Country 21 Country Trust Function Status Desired Pactor 20 Country 21 Country B. Electric Constitution Status Desired Applied For 20 Country 21 Country B. Trust Function Status Desired Applied For 310 Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 10. Name and Address of New Registered Agent Status Desired Status Desir						
Suite, Apt. #, etc. 53/16, Apt. #, etc. 5. Cartifacts of Status Desired \$8.75 Agatomal City, & State City & State City & State 5. Cartifacts of Status Desired \$8.75 Agatomal Zio Country 20 Country 8. Election Campaign Financing \$5.00 usey Beam Regulated Zio Country 20 Country 8. This corporation owes the current year Intangible Personal Property Tax Vea \$8.100 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 10. Name and Address of New Registered Agent 110. Name and Address of New Registered Agent SALINERD, OMAR 81 Name 41 Name 20 Country 8. This corporation owes the current year Intangible Registered Agent 10. Name and Address of New Registered Agent 10. Status Desired 10. Status Desind 10. Status Desired 10	Principal Place of Business	2a.	Mailing Address		4. FEI Number	
City & State C	0		Suite Apt # oto		65-0876611	
City & Stele City & Stele City & Stele City & Stele Added to Fee Zip Zip Zip Country R Added to Fee Zip Zip Zip Sin Strongoriton owes the current year intangible Personal Property Tax Wes Site 3. Name and Address of Current Registered Agent 81 Name Name Name and Address of New Registered Agent SALINERO, OMAR D. 10. Name and Address of New Registered Agent 81 Name SALINERO, OMAR D. 10. Name and Address of New Registered Agent 81 Name SALINERO, OMAR D. 10. Name and Address of New Registered Agent 81 Name SALINERO, OMAR D. 10. Name and Address of New Registered Agent 81 Name SALINERO, OMAR D. 10. Name and Address of New Registered Agent 81 Name 10. Name and Address of New Registered Agent Parsuant to the provisions of Sections 607 0502 and 607 1505. Florids Statutes, the above named comportation submit to Not Acceptable) 10. Name 10. Name Statutes Dotter Tores And Directores Name Dotter Section 607 0505. Florids Statutes Name Statutes Name	Suile, Api. #, elc.				5. Certifcate of Status Desired	
Zip Country Zip Sup Country a. This corporation owes the current year intemptible Personal Property Tax. Lives Status Lives Status Lives Status SALINERO, OMAR D. 10. Name and Address of Current Registered Agent 10. Name and Address of Advertes of New Registered Agent 10. Name and Address of Current Registered Agent SALINERO, OMAR D. Bit Street Address (P.O. Box Number is Not Acceptable) 10. Name and Address of Current Registered Agent MAM F1.33128 Bit Street Address (P.O. Box Number is Not Acceptable) 10. Name and Address of Current Registered Agent Parsault to the provisions of Sections 6070502 and 607 1509. Florkits Statutes. The above named corporation submits this atterment for the purpose of changing its registered agent, or both, the State of Florka. Such change was authorized by the corporation submits this atterment for the purpose of changing its registered agent, or both, the State of Florka. Such change was authorized by the corporation submits this atterment for the purpose of changing its registered agent, or both, the objections of Section 60.0056, Florka School 80.0056,	City & State		City & State			• • • • •
	Zip		Zip	Country		ar Intangible
SALINERO, OMAR D. SALINERO, OMAR D. STE 307 MAMI FL 33126 Bit Name Bit Name STE 307 MAMI FL 33126 Pursuant to the provisions of Sections 607 0502 and 607 1508. Florida Statules, the above-named corporation submits this statement for the purpose of changing its registered agent. in both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the obligations of . Section B07 3505, Florida Statutes. SMATURE Immediate with, and accept the obligations of . Section B07 3505, Florida Statutes. SMATURE Immediate with, and accept the obligations of . Section B07 3505, Florida Statutes. SMATURE Immediate with, and accept the obligations of . Section B07 3505, Florida Statutes. SMATURE Immediate with, and accept the obligations of . Section B07 3505, Florida Statutes. SMATURE Immediate with, and accept the obligations of . Section B07 3505, Florida Statutes. SMATURE Immediate with, and accept the obligation of . Section B07 3507, Florida Statutes. SALINERO, OMAR Immediate with applied with with applied with applied with				<u>o</u>		/
1150 NW 72 AVE STE 307 MMAIL FL 3126 Street Address (P.O. 502 Nullified is Not Addeptation) Pursuant to the provisions of Sections 607 (502 and 607 1506, Florids States the two-two-de concruiton submits the statement for the purpose of charging its registered agent. I and samples agent and the obligations of, Section 607 5505, Florids States the two-two-de concruiton submits the statement for the purpose of charging its registered agent. I and samples agent and the obligations of, Section 607 5505, Florids States the two-two-de concruiton submits the statement for the purpose of charging its registered agent. I and samples agent and the obligations of, Section 607 5505, Florids States. The comparison of charge its registered agent. I and samples agent and the obligations of, Section 607 5505, Florids States. The comparison of charge its registered agent. I and samples agent and the obligations of, Section 607 5505, Florids States. The comparison of charge its registered agent. I and samples agent and the obligations register agent and the modeling OFFICERS AND DIRECTORS IN 12. Image: OFFICERS AND DIRECTORS IN 12. Image: OFFICERS AND DIRECTORS IN 12. Image: Image:	9. Name and	1 Address of Current Regist	ered Agent	81 Name	10, Name and Address of New Regist	
STE 307 MIAMI FL 33126 63 Presume to the provision of Sections 607 0502 and 607 1508. Florids Statutes. the above-named corporation submits this statement for the purpose of changing the registered of end of sections agent, and accept the obligations of, Section 607.0505, Florids Statutes. the above-named corporation submits this statement for the purpose of changing the registered of end		\mathcal{D} .		82 Street Add	ress (P.O. Box Number is Not Acceptable)	
MAMI FL 33126 H City FL 65 Zip Code "Dursuant to the provisions of Sections 607.0502 and 607.1508. Florids Statutes. the above-named comportion submits this statement for the purpose of changing its registered agent. J and annual methods. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. J and annual methods. Social of 0.0505. Florids Statutes. SMATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. SMURENO. MAR I TITLE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. E SAUNERNO. MAR I TITLE I TITLE I Change Addition ST:2P MAMI FL 33126 I DELETE 1 TITLE I Change Addition E Cound or a florid and annual method annual metho				83		
Through to the provisions of Sactions 607 0502 and 607 1508. Floride Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent. I am familiar with, and accept the obligations of Saction 607 0505, Floride Statutes. SNATURE						7 Zin Code
office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. It intrady addept are appointed as a corporation's transference and the second statutes. DATE Signature, load of prime tame of registered agent was authorized by the corporation's board of directors. It intrady addept appalder accent devices tames and on the second statutes. DATE Signature, load of prime tame of registered agent was authorized by the corporation's board of directors. It intrady addept appalder accent addept and the intervision of the corporation's tame and addept appalder accent addept appalder accent addept appalder accent addept addept appalder accent addept addept addept accent addept addept addept accent addept addept addept accent addept addept accent addept addept addept accent addept addept addept addept addept accent addept addept addept addept accent addept	· .			· · · · · · · · · · · · · · · · · · ·		FL []
EEET ADDRESS 1150 NW 72 AVE, #307 13 STREET ADDRESS -ST-2P MAMI FL 33126 14 CITV-57: ZP E COBULT CASE Change Addition E COBULT CASE 23 STREET ADDRESS 23 STREET ADDRESS //ST-2P ////////////////////////////////////	2.	OFFICERS AND DIRE	CTORS	13	e,	RS AND DIRECTORS IN 12
c_ST-ZIP MIAMI FL 33126 14 CITV-ST-ZIP E C_SULV docs C_Strado DELETE 21 TTLE VE C_SD N V 7 2 Moe 473 67 23 STREET ADDRESS SGT ZP MI carry, flor 33 / 26 24 CITV-ST-ZIP E SITREF ADDRESS 24 CITV-ST-ZIP E 31 TTLE Change Addition KE 32 NAME 32 NAME SIT ZP 34 CITV-ST-ZIP Change Addition E 31 TTLE Change Addition KE 32 NAME 32 NAME SIT ZP 34 CITV-ST-ZIP Change Addition E DELETE 41 TTLE KE STREF ADDRESS Change Addition KE DELETE 41 TTLE KE STREF ADDRESS Change Addition KE DELETE STREF ADDRESS K3T-ZP STREF ADDRESS Change Addition K4 CITV-ST-ZP STREF ADDRESS Change Addition K5 DELETE STREF ADDRESS Change Addition K57-ZP STREF ADDRESS STREF ADDRESS Change Addition K57-ZP STREF ADDRESS					<i>,</i>	,
E LOULY day Estrado DELETE 21 TITLE 21 Change Addition EE COB Nor 72 Ave #367 23 STREET ADDRESS						
E 31 TITLE 31 TITLE Change Addition EET ADDRESS 33 STREET ADDRESS 34 CITY-ST-ZIP Change Addition E 0 DELETE 31 TITLE 0 Change Addition ME 2 NAME 34 CITY-ST-ZIP 0 Change Addition KE 4 Z NAME 4 Z NAME 0 Change Addition KE 4 Z NAME 4 CITY-ST-ZIP 0 Change Addition KE 4 Z NAME 4 CITY-ST-ZIP 0 Change Addition KE 5 S STREET ADDRESS 4 CITY-ST-ZIP 0 Change Addition KE 5 S STREET ADDRESS 5 S STREET ADDRESS 0 Change Addition KE 5 S STREET ADDRESS 5 S STREET ADDRESS 0 Change Addition KE 5 S STREET ADDRESS 5 S STREET ADDRESS 0 Change Addition KE 6 CITY-ST-ZIP 0 Change Addition 0 Change Addition KE 5 S STREET ADDRESS 5 S STREET ADDRESS 6 S S STREET ADDRESS 0 S STREET ADDRESS 0 S STREET ADDRESS 0 S STREET ADDRESS K-ST-ZIP 0 DELETE		des Estrado	DELETE			Change Addition
E 31 TITLE 31 TITLE Change Addition EET ADDRESS 33 STREET ADDRESS 34 CITY-ST-ZIP Change Addition E 0 DELETE 31 TITLE 0 Change Addition ME 2 NAME 34 CITY-ST-ZIP 0 Change Addition KE 4 Z NAME 4 Z NAME 0 Change Addition KE 4 Z NAME 4 CITY-ST-ZIP 0 Change Addition KE 4 Z NAME 4 CITY-ST-ZIP 0 Change Addition KE 5 S STREET ADDRESS 4 CITY-ST-ZIP 0 Change Addition KE 5 S STREET ADDRESS 5 S STREET ADDRESS 0 Change Addition KE 5 S STREET ADDRESS 5 S STREET ADDRESS 0 Change Addition KE 5 S STREET ADDRESS 5 S STREET ADDRESS 0 Change Addition KE 6 CITY-ST-ZIP 0 Change Addition 0 Change Addition KE 5 S STREET ADDRESS 5 S STREET ADDRESS 6 S S STREET ADDRESS 0 S STREET ADDRESS 0 S STREET ADDRESS 0 S STREET ADDRESS K-ST-ZIP 0 DELETE	ME COD	in so the	#367			
E 31 TITLE 31 TITLE Change Addition EET ADDRESS 33 STREET ADDRESS 34 CITY-ST-ZIP Change Addition E 0 DELETE 31 TITLE 0 Change Addition ME 2 NAME 34 CITY-ST-ZIP 0 Change Addition KE 4 Z NAME 4 Z NAME 0 Change Addition KE 4 Z NAME 4 CITY-ST-ZIP 0 Change Addition KE 4 Z NAME 4 CITY-ST-ZIP 0 Change Addition KE 5 S STREET ADDRESS 4 CITY-ST-ZIP 0 Change Addition KE 5 S STREET ADDRESS 5 S STREET ADDRESS 0 Change Addition KE 5 S STREET ADDRESS 5 S STREET ADDRESS 0 Change Addition KE 5 S STREET ADDRESS 5 S STREET ADDRESS 0 Change Addition KE 6 CITY-ST-ZIP 0 Change Addition 0 Change Addition KE 5 S STREET ADDRESS 5 S STREET ADDRESS 6 S S STREET ADDRESS 0 S STREET ADDRESS 0 S STREET ADDRESS 0 S STREET ADDRESS K-ST-ZIP 0 DELETE	REET ADORESS	FP. 3	3126			
BET ADDRESS 3.3 STREET ADDRESS AST-ZIP						
A. ST-ZIP 34. CITY-ST-ZIP E DELETE IF DELETE IF DELETE IF ITTLE IF ITTLE<	للاسعم المعتادية المستعم المست					
E DELETE 4.1 TTLE Change Addition ME 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP Change Addition E DELETE 5.1 TTLE OChange Addition KE DELETE 5.1 TTLE OChange Addition KE STREET ADDRESS 5.3 STREET ADDRESS Addition KE S.3 STREET ADDRESS 5.4 CITY-ST-ZIP OChange Addition KET ADDRESS S.4 CITY-ST-ZIP S.4 CITY-ST-ZIP OChange Addition KET ADDRESS S.4 CITY-ST-ZIP S.4 CITY-ST-ZIP OChange Addition K-ST-ZIP S.4 CITY-ST-ZIP S.4 CITY-ST-ZIP S.4 CITY-ST-ZIP S.4 CITY-S				3.2 NAME		
EET ADDRESS 4.3 STREET ADDRESS /-ST-ZIP 44 CITY-ST-ZIP E DELETE BE DELETE STREET ADDRESS 5.3 STREET ADDRESS /-ST-ZIP Change /-ST-ZIP Addition /-ST-ZIP Change /-ST-ZIP StrEET ADDRESS /-ST-ZIP StrEET ADDRESS <tr< td=""><td>REET ADDRESS</td><td></td><td></td><td>3.2 NAME 3.3 STREET ADORESS</td><td></td><td></td></tr<>	REET ADDRESS			3.2 NAME 3.3 STREET ADORESS		
A 4 CITY-ST-ZIP 44 CITY-ST-ZIP E DELETE 5.1 TITLE INE S2 NAME S2 NAME S3 STREET ADDRESS C+ST-ZIP S4 CITY-ST-ZIP E DELETE 6.1 TITLE Change Addition ME S3 STREET ADDRESS C+ST-ZIP E DELETE 6.1 TITLE Change Addition ME S3 STREET ADDRESS C+ST-ZIP Change Addition 61 TITLE Change Addition 62 NAME S3 STREET ADDRESS C+ST-ZIP 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 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 indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the sam	REET ADDRESS Y-ST-ZIP			3.2 NAME 3.3 STREET ADORESS 3.4. CITY-ST-ZIP 4.1 TITLE		
E DELETE 5.1 TITLE Change Addition IE 5.2 NAME 5.3 STREET ADDRESS 5.3 STREET ADDRESS /-ST-ZIP 5.4 CITY-ST-ZIP Change Addition IE DELETE 6.1 TITLE Change Addition ME 0 DELETE 6.1 TITLE Change Addition ME 0 DELETE 6.1 TITLE Change Addition ME 0 STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 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 indicate do not the corporation or the receiver or this tee emowered this report of as required by Chapter 607. Florida Statutes; and that my name appears in	REET ADDRESS Y-ST-ZIP LE ME			32 NAME 33 STREET ADDRESS 34. CITY-ST-ZIP 4.1 TITLE 4.2 NAME		
EET ADDRESS 5.3 STREET ADDRESS /-ST-ZIP 5.4 CITY-ST-ZIP E DELETE ME 6.1 TITLE ME 6.2 NAME 6.3 STREET ADDRESS /-ST-ZIP IL	IEET ADDRESS			32 NAME 33 STREET ADORESS 34. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADORESS	· · · · · · · · · · · · · · · · · · ·	Change Addition
A-ST-ZIP 5.4 CITY-ST-ZIP E DELETE Image: Delete to the comparison of the comparis of the comparison of the comparis of the comparison o	REET ADDRESS Y- ST- ZIP JE NE REET ADORESS Y- ST- ZIP	· · · · · · · · · · · · · · · · · · ·	DELETE	32 NAME 33 STREET ADDRESS 34. CITY-ST-ZIP 4.1 TITLE 4. 2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE		Change Addition
E DELETE 6.1 TITLE Change Addition ME 6.2 NAME 6.3 STREET ADDRESS Change Addition Active state 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP Change Addition 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 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 correction or the receiver or this tree emowered this report to be corrective for the the appears in	IEET ADDRESS A ST-ZIP IE IEET ADDRESS A ST-ZIP IE IE IE	· · · · · · · · · · · · · · · · · · ·	DELETE	32 NAME 3.3 STREET ADORESS 34. CITY-ST-ZIP 4.1 TITLE 4. 2 NAME 4.3 STREET ADORESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME	· · · · · · · · · · · · · · · · · · ·	Change Addition
Image: Control of the comparison of	EET ADDRESS - ST-ZIP E E EET ADORESS - ST-ZIP E E E E E TADRESS E E TADRESS		DELETE	32 NAME 3.3 STREET ADORESS 34. CITY-ST-ZIP 4.1 TITLE 4. 2 NAME 4.3 STREET ADORESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADORESS	· · · · · · · · · · · · · · · · · · ·	Change Addition
64 CITY-ST-ZIP (-ST-ZIP) 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 corroration or the receiver or trustee emowered to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in	REET ADDRESS Y-ST-ZIP LE WE REET ADDRESS Y-ST-ZIP LE WE REET ADDRESS Y-ST-ZIP VE VE <tr< td=""><td></td><td>DELETE</td><td>32 NAME 33 STREET ADORESS 34. CITY-ST-ZIP 4.1 TITLE 4. 2 NAME 4.3 STREET ADORESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADORESS 5.4 CITY-ST-ZIP 6.1 TITLE</td><td>· · · · · · · · · · · · · · · · · · ·</td><td>Change Addition</td></tr<>		DELETE	32 NAME 33 STREET ADORESS 34. CITY-ST-ZIP 4.1 TITLE 4. 2 NAME 4.3 STREET ADORESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADORESS 5.4 CITY-ST-ZIP 6.1 TITLE	· · · · · · · · · · · · · · · · · · ·	Change Addition
. 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 corroration or the receiver or trustee empowered this report by the two receivers in the receiver or trustee empowered to execute this report by Corroration or the receiver or trustee empowered to execute this report by Corroration or the the receiver or trustee empowered to execute this report by Corrorate Roman and that my name appears in	REET ADDRESS Y-ST-ZIP JE WE REET ADDRESS Y-ST-ZIP JE ME KEET ADDRESS Y-ST-ZIP JE ME V-ST-ZIP LE ME ME		DELETE	32 NAME 33 STREET ADORESS 34. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 52 NAME 53 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME		Change Addition
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	LE ME REET ADDRESS Y. ST-ZIP LE REET ADDRESS Y-ST-ZIP LE REET ADDRESS Y-ST-ZIP LE ME REET ADDRESS Y. ST-ZIP			3.2 NAME 3.3 STREET ADORESS 3.4. CITY-ST-ZIP 4.1 TITLE 4. 2 NAME 4.3 STREET ADORESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADORESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADORESS 6.4 CITY-ST-ZIP		Change Addition
	REET ADDRESS F. ST-ZIP KE E KEET ADDRESS Y-ST-ZIP LE KEET ADDRESS Y-ST-ZIP	anod or supplemental appual	DELETE DELETE DELETE DELETE	32 NAME 33 STREET ADORESS 34. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 52 NAME 53 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 62 NAME 63 STREET ADDRESS 6.4 CITY-ST-ZIP he exemption stated in he and the my simpatur	Section 119.07(3)(i), Florida Statutes. I furti	Change Addition
	EET ADDRESS -ST-ZIP E E E E E E E E E E E E E	eport or supplemental annual orporation or the receiver or tr hanged, or on an attachment y	DELETE	32 NAME 33 STREET ADORESS 34. 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 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP he exemption stated in he	Section 119.07(3)(i), Florida Statutes. I furth e shall have the same legal effect as if mad bired by Chapter 607, Florida Statutes; and	Change Addition