TOTAL SPORTS MANAGEMENT, INC-     ************************************		PROFIT CORPORATION ANNUAL REPORT <b>1999</b>		IDA DEPARTMENT OF S Katherine Harris Secretary of State ISION OF CORPORATION		Apr 15, 1 Secreta	LED 999 8:00 ry of Sta	
Interpretation of Business     Mating Address       COUNCRE, OTT     COUNCRE, OTT       SS S MASCRE DIRE, STE 302     MAIR PL 3933       MAIR PL 3933     MAIR PL 3933       Data PL 2015     Standard Status PL 2015       S S MASCRE DIRE, STE 302     MAIR PL 3933       MAIR PL 3933     Status PL 2015       Status ALL Are     Status ALL Are       Statu	Interplate Principal Fibration of Basiness Mailing Address   C/OW CHEL ONTZ C/OW CHEL ONTZ   S & SANSORE DIVE, STE, SQ 26% S & SANSORE DIVE, STE, SQ   Mind R, STS A. STATUS   Principal Prevo of Business I.a. Mailing Address   C/OW CHEL ONTZ I.a. Mailing Address   Diricital Control I.a. Mailing Address   State, A.R. F. Rot. S. 250 S Low (34 TH* PL)   I.a. Mailing Address I.a. Mailing Address   State, A.R. F. Rot. S. 250 A Low (34 TH* PL)   State, A.R. F. Rot. S. Celliform Cansage Filtering   J. Total Filter Control State, A.R. F. Rot.   J. Total Filter Control State, A.R. F. Rot.   J. Total Filter Control State, A.R. F. Rot.   J. Total Filter Control State Control   State Address of Event Address of Event Registered Agent I.a. Mailing Address of Event Address of Event Registered Agent   J. Name and Address of Event Registered Agent I.a. Mailing Address of Event Registered Agent   J. Name and Address of Event Registered Agent I.a. Mailing Address of Event Registered Agent   J. Product to the provision of Sections 607, 5002 and 507, 5003, Enclide Statute, Edubate Rot Registered Agent   J. Product to the provision of Sections 607, 5002 and 507, 5003, Enclide Statute, Edubate Rot Registered Agent   J. Product to the provision of Sections 607, 5002 and 507, 500	r. Corporation Name						
Display     C/D     MC/MEL     MC/MEL     MC/MEL     MC/MEL     MC/MEL     MC/MEL     MC/MEL     MC/MEL <th>Junce     CONCURSE CONTZ     CONCURSE CONTZ     Display       285 S BANYCHE DIWE, STE, SQ2     MAMI FL 33133     3. Date Incorporated or Quelified     Incorporated or Quelified       12/29/1998     2. Mathing Address     2. Mathing Address     6. G, S - O PO I I G G P     And Applied For       1/22/20/1998     13/4717 PL     30     13/277     State Incorporated or Quelified     Per Applied For       1/22/20/1998     13/4717 PL     30     S.25/0 Nov 8.     9. Ontor WRITE IN THIS SPACE     Per Applied For       1/22/20/1998     13/4717 PL     30     State Incorporated or Quelified     Per Applied For       1/22/20/1998     Control     31/77     State Incorporate Property Tax.     Per Applied For       2/0     Control     33/77     Control     Interpret and Address of New Registered Agent     Per Applied For       3/177     31/20     U.S.A.     33/77     State     Per Applied For     Per Applied For       3/177     31/20     U.S.A.     31/20     Per Applied For     Per Applied For       3/177     31/20     U.S.A.     Per Applied For     Per Applied For     Per Applied For&lt;</th> <th>······</th> <th><u> </u></th> <th></th> <th></th> <th></th> <th></th> <th></th>	Junce     CONCURSE CONTZ     CONCURSE CONTZ     Display       285 S BANYCHE DIWE, STE, SQ2     MAMI FL 33133     3. Date Incorporated or Quelified     Incorporated or Quelified       12/29/1998     2. Mathing Address     2. Mathing Address     6. G, S - O PO I I G G P     And Applied For       1/22/20/1998     13/4717 PL     30     13/277     State Incorporated or Quelified     Per Applied For       1/22/20/1998     13/4717 PL     30     S.25/0 Nov 8.     9. Ontor WRITE IN THIS SPACE     Per Applied For       1/22/20/1998     13/4717 PL     30     State Incorporated or Quelified     Per Applied For       1/22/20/1998     Control     31/77     State Incorporate Property Tax.     Per Applied For       2/0     Control     33/77     Control     Interpret and Address of New Registered Agent     Per Applied For       3/177     31/20     U.S.A.     33/77     State     Per Applied For     Per Applied For       3/177     31/20     U.S.A.     31/20     Per Applied For     Per Applied For       3/177     31/20     U.S.A.     Per Applied For     Per Applied For     Per Applied For<	······	<u> </u>					
Emicipal Place of Business     24. Maining Address     24. Maining Address     4. FEI Humber     65.7.0 9.0 16.6 9     Applied From       19/23/20 / UK     13/27 / 15.250 <td< td=""><td>Principal Place of Business     Tax. Mathing Address     Tax. Mathing Address     File Number of Sec.     Applicable       State, Ap. 8, etc.     Suite, Ap. 8, etc.</td><td>Principal Place of Business (O MICHAEL ORTIZ 65 S BAYSHORE DRIVE, STE, 902 AMI FL 33133</td><td>C/O MICHAEL O 2665 S BAYSHOI</td><td>RTIZ</td><td></td><td>3. Date Incorporated or Qualifed</td><td>E IN THIS SPACE</td><td></td></td<>	Principal Place of Business     Tax. Mathing Address     Tax. Mathing Address     File Number of Sec.     Applicable       State, Ap. 8, etc.     Suite, Ap. 8, etc.	Principal Place of Business (O MICHAEL ORTIZ 65 S BAYSHORE DRIVE, STE, 902 AMI FL 33133	C/O MICHAEL O 2665 S BAYSHOI	RTIZ		3. Date Incorporated or Qualifed	E IN THIS SPACE	
Siles April Face     Siles April Face<	State, April, Hote:	2. Principal Place of Business		dress	VALC	A EEI Number	G Ap	
Only State   Only State   Only State	Coly & State   Coly & State   Coly & State   1   State   1   Added to Face     Zp   Country   Zp   33.7.7   Test Fund Contribution owes the current year Intangable   1     20   State   1   Name   1   Name and Address of Current Registered Agent   1   1	Suite, Apt. #, etc.	Suite, Apt.	#, etc.			\$8.75	Additional
Zp   Country   Zp   33/77   Si   LSA   Personal Property Tax   Test output thanglabe     0   B. Name and Address of Current Registered Agant   10. Name and Address of New Registered Agent   Image: Country   Test output thanglabe   Test ou	Zip   Country   20   33177   30   U.S.A   Personal Property Tax.   Vis   Min     1   Name and Address of Current Registered Agent   10. Name and Address of New Registered Agent   10. Name and Address of New Registered Agent   10. Name and Address of New Registered Agent     ORTZ, MICHAEL   285 S BAYSHORE DRIVE, STE. 902   82   Street Address (P.O. Box Number Is Not Acceptable)     MAMI FL 33133   44   City   FL_   85   Zip Code     41   City   FL_   85   Zip Code     42   Street Address (P.O. Box Number Is Not Acceptable)   Mame and acceptable)   Mame and acceptable)     44   City   FL_   85   Zip Code     45   Street Address (P.O. Box Number Is Not Acceptable)   Mame and acceptable is provisione of Section 607 (500 and 607 (500	City & State	City & Stat	e	-			
00TIZ, MICHAEL   01   Name     2665 S BAYSHORE DRIVE, STE. 902   82   Street Address (P.O. Box Number is Not Acceptable)     83   84   City   FL   85   Zip Code     84   City   FL   85   Zip Code     85   84   City   FL   85   Zip Code     86   64   City   FL   85   Zip Code     87   64   City   FL   85   Zip Code     88   City   FL   85   Zip Code     89   City   FL   85   Zip Code     89   City   FL   85   Zip Code     80   City   FL   85   Zip Code     80   City   FL   85   Zip Code     80   FL   City   FL   85   Zip Code     80   POTE Reparked Apent optical statutes.   ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12   Addition     81   Street Address (P.O. Box Number is Not Acceptable)   Addition   Zip Pointers Andress     82   Street Address (P.O. Box Numer apent and	ORTIZ, MICHAEL 2865 S BAYSHORE DRIVE, STE. 902   81   Name     1   Pursuant to the provisions of Sections 607 0502 and 607.1508, Florida Statutes. the above-named corporation submits this statement for the purpose of charging its registered agent, or both, in the State of Florida. Studic drange was authorized by the corporation's board of directors. Thereby accept the objection's Statute. Thereby accept the objection for 7.502, Florida Statutes, and board of directors. Thereby accept the objection for 7.502, Florida Statutes, and accept the objection's board of directors. Thereby accept the objection for 7.502, Florida Statutes, and accept the objection's board of directors. Thereby accept the objection for 7.502 mice the activity of the corporation's board of directors. Thereby accept the objection for 7.502 mice the activity of the corporation's board of directors. Thereby accept the objection for 7.502 mice the activity of the corporation's board of directors. Thereby accept the objection for 7.502 mice the activity of the corporation's board of directors. Thereby accept the objection for 7.502 mice the activity of the accept the activity of the activity of the activity of the activity. Thereby accept the objection for 7.502 mice the activity of the actin the activity of the activity of the activ	Zip Country 4 33177 25 US	A 29 33	177 30 ÚS		Personal Property Tax.	🗌 Yes	K No
94   City   EL   85   Zip Code     11. Pursuant to the provisions of Sections 607 0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purces of changing its registered agent. an entities with, and except the obligations of, Section 607.0505, Florida Statutes.   Image: Lam demilia with, and except the obligations of, Section 607.0505, Florida Statutes.     SIGNATURE   Sections 607.0502 memory of 07.0505, Florida Statutes.   Image: Lam demilia with, and except the obligations of, Section 607.0505, Florida Statutes.   Image: Lam demilia with, and except the obligations of, Section 607.0505, Florida Statutes.     SIGNATURE   OFFICEERS AND DIRECTORS   13.   ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12     ITRE   P245-120C/L   DELETE   11 ITRE     ITRE   P245-120C/L   Cange   Addition     ITREE ADDRESS   13.3   ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12   Change   Addition     ITREE ADDRESS   13.3   STREET ADDRESS   Change   Addition     ITREE ADDRESS   13.1   Change   Addition     ITREE ADDRESS   23.177   14.017/ST.2P   Change   Addition     ITREE ADDRESS   33.578EF ADDRESS   33.578EF ADDRESS   STREE ADDRESS   STREE ADDRESS   STREE ADDRESS   STREE ADDR	4   City   FL   82   2ip Code     4. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the provise of changing its registered agent. 1 and million with, and accept the obligations of Section 607.0506, Florida Statutes.   Intervision statutes, the corporation's board of directors. I hereby accept the appointment as registered agent. 1 and million with, and accept the obligations of Section 607.0506, Florida Statutes.     IGNATURE     Suparate type or this a function.     OFFICERS AND DIRECTORS     13.   ADDITIONSICHANGES TO OFFICERS AND DIRECTORS IN 12     PAS 5 in DCNT     DELETE     11/11/12     Colspan="2">Colspan="2"     Span="2">Colspan= Colspan="2"   Colspan= Colspan="2">Colspan= Colspan="2"     Colspan= Colspan="2"     Colspan= Colspan="2"     Colspan= Colspan="2"     Colspan= Colspan="2"	ORTIZ, MICHAEL		81	Name			
11. Pureusant to the provisione of Sectione 607 0502 and 507.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered egent. I an except the obligations of Section 607.0505, Florida Statutes.     11. Pureusant to the provisione of Section e 607 0502 and 507.1508, Florida Statutes.     11. Pureusant to the provisione of Section e 607.0505, Florida Statutes.     12. OFFICERS AND DIRECTORS     13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12     14. DOFFICERS AND DIRECTORS     13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12     14. DOFFICERS AND DIRECTORS     13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12     14. DOFFICERS AND DIRECTORS     13. STREET ADDRESS     13. OFFICERS AND DIRECTORS     14. OFFICERS AND DIRECTORS     15. STREET ADDRESS     13. STREET ADDRESS<	1. Pursuant to the provisions of Sections 607 0502 and 607 1506, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered officer 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, and antimizer with, and exact the obligations of, Section 607 0505, Florida Statutes.     IGNATURE   Bipation, typed or parted name of registered agent and the state of Florida, Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, and florida structures.     IGNATURE   Bipation, typed or parted name of registered agent and the statement.     2.   OFFICERS AND DIRECTORS     13.   ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12     14.   Deleter     15.   DIRECTOR:     16.   DIRECTOR:     17.   DELETE     18.   DIRECTOR:     18.   DIRECTOR:     18.   DIRECTOR:     18.   DIRECTOR:     19.00000	MIAMI FL 33133			<u></u>		es Zin (	Code
WME   POGE 2TO C ECC HINI BQUNI   12NME     ITTREET ADDRESS   13 STREET ADDRESS     ITTLE   DIRECT OR     ITTLE   DIRECT ADDRESS	NWE   POGE 2TO C ECC. HINI B 2001   12 NAME     REFTADRESS   P2.50 S W [34 TH Puce, # 168   13 STREET ADDRESS     TN:ST.2P   MiAM, FL 33 I 77   14 OTY-ST.2P     NE   DIRECTOR   DELETE     21 MAR   22 NAME   22 NAME     NST.2P   MIAM, FL 33 I 77   14 OTY-ST.2P     NE   DIRECTOR   DELETE     21 NME   23 STREET ADDRESS     NST.2P   MIAM, FL 33 I 77     NST.2P   OBLETE     NT-ST.2P   0 DELETE     NST.2P   0 DELETE     17.ST.2P   0 DELETE     NST.2P   0 DELETE     17.ST.2P   0 DELETE     17.ST.2P   0 DELETE     17.ST.2P   0 DELETE     18E   0 DELETE     17.ST.2P   0 DELETE     18.STRET ADDRESS   0 DELETE     17.ST.2P   0 DELETE     17.ST.2P   0 DELETE     18.GTY-ST.2P   0 DELETE <tr< th=""><th>agent. I am familiar with, and accept the ob SIGNATURE Signature, typed or printed name of registered</th><th>ligations of, Section 60</th><th>(NOTE: Registered Agent s</th><th></th><th>nen reinstating)</th><th>DATE</th><th></th></tr<>	agent. I am familiar with, and accept the ob SIGNATURE Signature, typed or printed name of registered	ligations of, Section 60	(NOTE: Registered Agent s		nen reinstating)	DATE	
Interest powers   INV ST UP   Interest powers   Interest powers   Interest powers     Interest powers   Interest powers   Interest powers   Interest powers   Interest powers     Interest powers   Interest powers   Interest powers   Interest powers   Interest powers   Interest powers     Interest powers   Interest powers   Interest powers   Interest powers   Interest powers   Interest powers     Interest powers   Interest powers   Interest powers   Interest powers   Interest powers   Interest powers     Interest powers   Inte	REETADDRESS   ISTREETADDRESS     NEXTADRESS   ISTREETADDRESS     NY.ST.20   MIA.M.J., FL. 33 17)     LE   DIGECTOR     RETADDRESS   ISTREETADRESS     NY.ST.20   MIA.M.J., FL. 33 17)     LE   DIGECTOR     NY.ST.20   MIA.M.J., FL. 33 17)     LE   DELETE     ST.ST.20   MIA.M.J., FL. 33 17)     LE   DELETE     NY.ST.20   MIA.M.J., FL. 33 17)     LE   DELETE     ST.ST.20   DELETE     NRET.ADDRESS   ISTREETADDRESS     NY.ST.20   MIA.M.J., FL. 33 17)     LE   DELETE     ST.ST.20   DELETE     NRET.ADDRESS   ISTREETADDRESS     NY.ST.20   ISTREETADDRESS     NY.ST.20   ISTREETADDRESS     NRET.ADDRESS   ISTREETADDRESS     NY.ST.20   ISTREETADDRESS     NY.ST.20   ISTREETADDRESS     NY.ST.20   ISTREETADDRESS     NY.ST.20   ISTREETADDRESS     NY.ST.20   ISTREETADDRESS     NKE   ISTREETADDRESS     NY.ST.20	THE PRESIDENT AME POBERTO CECCHIN	, BRUNI					Addition
Image   DirLife   21 mile   Change   Induction     WWE   REGINALL & RUNNI   22 NAME   23 STREET ADDRESS   23 STREET ADDRESS     STREET ADDRESS   ISS2SO SW I34 IM PL # 108   23 STREET ADDRESS   Induction   Induction     STREET ADDRESS   ISS2SO SW I34 IM PL # 108   23 STREET ADDRESS   Induction   Induction     STREET ADDRESS   ISTREET ADDRESS   Induction   Induction   Induction     STREET ADDRESS   ISSTREET ADDRESS   Induction   Induction     STREET ADDRESS   Induction   Induction   Induction	ILE   DidEcTOIC   DidLetre   21 Title   DidLetre   Did	CITY-ST-ZIP MIAMI, FL 331	77	1.4 CITY-ST-				
THE   DELETE   3.1 TTLE   Change   Addition     WWE   32 NAME   33 STREET ADDRESS   33 STREET ADDRESS   ddition     STREET ADDRESS   34, CTY-ST-ZP   Change   Addition     MWE   0 DELETE   4, 1 TTLE   Change   Addition     STREET ADDRESS   33 STREET ADDRESS   Change   Addition     STREET ADDRESS   4, 2 NAME   Change   Addition     STREET ADDRESS   43 STREET ADDRESS   Change   Addition     STREET ADDRESS   44 CTY-ST-ZP   Change   Addition     MAE   52 NAME   S1 STREET ADDRESS   Change   Addition     STREET ADDRESS   S3 STREET ADDRESS   S3 STREET ADDRESS   Change   Addition     STREET ADDRESS   S3 STREET ADDRESS   S3 STREET ADDRESS   S3 STREET ADDRESS   S3 STREET ADDRESS     STREET ADDRESS   S3 STREET ADDRESS   S3 STREET ADDRESS   S3 STREET ADDRESS   S3 STREET ADDRESS     STR-ST-ZP   Change   Addition   S3 STREET ADDRESS   S3 STREET ADDRESS   S3 STREET ADDRESS     STR-ST-ZP   S4 CTY-ST-ZP   S4 CTY-ST-ZP   S4 CTY-ST-ZP   Change	Image   OELETE   3.1 TTLE   Image   Addition     INKE   32 NAME   33 STREET ADDRESS   Image   Addition     INKE   33 STREET ADDRESS   Image   Addition     Intel   Image   OELETE   11 TTLE   Image   Addition     Intel   Image   OELETE   11 TTLE   Image   Addition     NAME   Image   Image   Addition   Addition     NAME   Image   Image   Image   Addition     NAME   SITTY-ST-ZIP   Image   Image   Image   Image     NAME   SITTY-ST-ZIP   Image   Image   Image   Image   Image     NAME   SITTY-ST-ZIP   Image   Image   Image   Image   Image   Image   Image   Image   Image<	DEGINA RUNI	-	2.2 NAME	DORESS		[] Change	
STREET ADDRESS   3.3 STREET ADDRESS     STREET ADDRESS   3.4 CITY-ST-ZIP     ITTLE   DELETE     4.1 TITLE   Change     VAME   4.2 NAME     STREET ADDRESS   4.3 STREET ADDRESS     CITY-ST-ZIP   4.4 CITY-ST-ZIP     ITTLE   0 DELETE     STREET ADDRESS   4.4 CITY-ST-ZIP     ITTLE   0 DELETE     STREET ADDRESS   4.4 CITY-ST-ZIP     ITTLE   0 DELETE     STREET ADDRESS   5.3 STREET ADDRESS     CITY-ST-ZIP   0 DELETE     STREET ADDRESS   5.3 STREET ADDRESS     CITY-ST-ZIP   0 DELETE     STREET ADDRESS   5.3 STREET ADDRESS     CITY-ST-ZIP   0 DELETE     STREET ADDRESS   5.4 CITY-ST-ZIP     CITY-ST-ZIP   0 DELETE     6.3 STREET ADDRESS   6.3 STREET ADDRESS     STY-ST-ZIP   6.4 CITY-ST-ZIP     VAME   6.3 STREET ADDRESS     STY-ST-ZIP   6.4 CITY-ST-ZIP <td>TY: ST: 2P   33 STREET ADDRESS     TY: ST: 2P   34 CITY: ST: 2P     TLE   DELETE     4. CITY: ST: 2P   Change     ACCITY: ST: 2P   Change     TREET ADDRESS   43 STREET ADDRESS     TY: ST: 2P   44 CITY: ST: 2P     Change   Addition     NME   51 STREET ADDRESS     TY: ST: 2P   44 CITY: ST: 2P     ME   51 STREET ADDRESS     TLE   DELETE     STREET ADDRESS   STREET ADDRESS     TREET ADDRESS   STREET ADDRESS     TREET ADDRESS   STREET ADDRESS     TREET ADDRESS   STREET ADDRESS     TY: ST: 2P   Change     TREET ADDRESS   STREET ADDRESS     TY: ST: 2P   Statutes     TREET ADDRESS   STREET ADDRESS     TY: ST: 2P   Statutes     TY: ST: 2P   Change     A. 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 pr 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 corpotedion or the receive</td> <td>CITY-ST-ZIP MIAMI, FL 331</td> <td><u>ר </u></td> <td></td> <td>ZIP</td> <td>·</td> <td>Change</td> <td>Addition</td>	TY: ST: 2P   33 STREET ADDRESS     TY: ST: 2P   34 CITY: ST: 2P     TLE   DELETE     4. CITY: ST: 2P   Change     ACCITY: ST: 2P   Change     TREET ADDRESS   43 STREET ADDRESS     TY: ST: 2P   44 CITY: ST: 2P     Change   Addition     NME   51 STREET ADDRESS     TY: ST: 2P   44 CITY: ST: 2P     ME   51 STREET ADDRESS     TLE   DELETE     STREET ADDRESS   STREET ADDRESS     TREET ADDRESS   STREET ADDRESS     TREET ADDRESS   STREET ADDRESS     TREET ADDRESS   STREET ADDRESS     TY: ST: 2P   Change     TREET ADDRESS   STREET ADDRESS     TY: ST: 2P   Statutes     TREET ADDRESS   STREET ADDRESS     TY: ST: 2P   Statutes     TY: ST: 2P   Change     A. 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 pr 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 corpotedion or the receive	CITY-ST-ZIP MIAMI, FL 331	<u>ר </u>		ZIP	·	Change	Addition
Image: Change in 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 dicated 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 cath; that I am an officier or director of the corror of the corro	The method   DELETE   4.1 TITLE   Change   Addition     AWE   4.2 NAME   4.3 STREET ADDRESS   4.3 STREET ADDRESS     TY-ST-ZIP   DELETE   5.1 TITLE   Change   Addition     TLE   DELETE   5.1 TITLE   Change   Addition     MAE   52 NAME   52 NAME   53 STREET ADDRESS   Addition     TY-ST-ZIP   54 CITY-ST-ZIP   54 CITY-ST-ZIP   Change   Addition     TLE   0 DELETE   6.1 TITLE   Change   Addition     MAE   53 STREET ADDRESS   54 CITY-ST-ZIP   Change   Addition     TLE   0 DELETE   6.1 TITLE   Change   Addition     MAE   62 NAME   63 STREET ADDRESS   Change   Addition     TY-ST-ZIP   0 DELETE   6.1 TITLE   0 Change   Addition     MAE   63 STREET ADDRESS   64 CITY-ST-ZIP   0 Addition   61 Street ADDRESS   64 CITY-ST-ZIP     Y-ST-ZIP   64 CITY-ST-ZIP   64 CITY-ST-ZIP   0 Change   1 Addition     MAE   62 NAME   63 STREET ADDRESS   64 CITY-ST-ZIP   0 Change   1 Addition </td <td></td> <td></td> <td>3.3 STREET A</td> <td></td> <td></td> <td></td> <td></td>			3.3 STREET A				
At CITY-ST-ZIP   44 CITY-ST-ZIP     ITTLE   DELETE     STREET ADDRESS   5.1 TITLE     STREET ADDRESS   5.3 STREET ADDRESS     CITY-ST-ZIP   5.4 CITY-ST-ZIP     ITTLE   0 DELETE     6.1 TITLE   0 Change     Addition     STREET ADDRESS     CITY-ST-ZIP     ITTLE     0 DELETE     6.1 TITLE     0 DELETE     6.1 TITLE     0 DELETE     6.1 TITLE     0 DELETE     6.1 TITLE     0 DELETE     6.3 STREET ADDRESS     STREET ADDRESS     CITY-ST-ZIP     0 DELETE     6.1 TITLE     0 DELETE     6.3 STREET ADDRESS     CITY-ST-ZIP     14. 1 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 the recording to the recording to execute this report as required by Chapter 607. Florida Statutes; and that my name appears in	TY-ST-ZIP   44 CITY-ST-ZIP     TLE   DELETE     S1 TITLE   S1 TITLE     NWE   S2 NAME     ITY-ST-ZIP   S3 STREET ADDRESS     TY-ST-ZIP   S4 CITY-ST-ZIP     TLE   DELETE     S4 CITY-ST-ZIP   Change     TLE   Addition     REET ADDRESS   S4 CITY-ST-ZIP     TLE   DELETE     G1 TITLE   Change     AME   62 NAME     G2 NAME   63 STREET ADDRESS     TY-ST-ZIP   64 CITY-ST-ZIP     4. 1 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 receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.	me		DELETE 4.1 TITLE	- <u>ZIP</u>		Change	Addition .
Inte   Strict   Strict     VAME   52 NAME     STREET ADDRESS   S3 STREET ADDRESS     CITY-ST-ZIP   S4 CITY-ST-ZIP     ITTLE   DELETE     61 TITLE   Change     Addition   62 NAME     STREET ADDRESS   S4 CITY-ST-ZIP     ITTLE   DELETE     61 TITLE   Change     STREET ADDRESS   63 STREET ADDRESS     CITY-ST-ZIP   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 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 coordedition of the receiver or trustee empowered to execute this report perfore tax required by Chapter 607. Florida Statutes; and that my name appears in	ILE   3.1 ML   5.2 NAME     WE   52 NAME   5.3 STREET ADDRESS     ITY-ST-ZIP   5.4 CITY-ST-ZIP     TLE   5.4 CITY-ST-ZIP     TLE   6.1 TITLE     AME   6.2 NAME     ITY-ST-ZIP   6.1 TITLE     Change   Addition     6.2 NAME   6.3 STREET ADDRESS     ITY-ST-ZIP   6.4 CITY-ST-ZIP     4. 1 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 officier 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 Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.	STREET ADDRESS CITY-ST-ZIP		4.4 CITY- ST-				
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