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PROFIT CORPORATION ANNUAL REPORT

1997

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FLORIDA DEPARTMENT OF STATE

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Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # S00676

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22 29 30 Florida Statutes DV Ves No 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent FOULKE, LARRY D. 2005 NW 62ND ST SUITE 201 62 Street Address (P.O. Box Number is Not Acceptable) FT. LAUDERDALE FL 33309 83 83 44 City FL 85 Zip Code 11. Pursuant to the provisions of Socions 607 0502 and 607 1508. Florida Statutes, the above-named corporation submits this statement for the purpose of changing fits region of the family of the corporation in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent 1 and rem har with, and accept the obligations of Socione 607 5055, Florida Statutes. SIGNATURE Determine the provisions of Socions 607 0502 and 607 1508. Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as 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 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 agent agent agent and ten was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent agen	23			····-			<u> 7</u>		
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508. Floridal Statutes, the above-named corporation submits this statement for the purpose of changing its registered agont or both, in the State of Floridal Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registed agont or both, and accept the obligations of, Section 607.0505, Floridal Statutes. SIGNATURE Signature, hybrid or printed nume of registered agent and site if applicable. NOTE: Registered Agent signature required when rerotating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1 ITILE DP FOULKE, LARRY D. 11 TITLE POMPANO BEACH FL 11 CHANGE STREET ADDRESS FOULKE, CYNTHIA S. 964 SW 10TH CT 22 NAME STREET ADDRESS FOULKE, CYNTHIA S. 964 SE 10TH CT 23 STREET ADDRESS GITY-ST-ZIP FOMPANO BEACH FL DELETE 11 TITLE 1 CHANGE 32 NAME 32 NAME 32 NAME 33 STREET ADDRESS GITY-ST-ZIP TITLE 1 DELETE 1 TITLE 1 CHANGE 4 CHANGE					84 City			85 Zip (Code
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14. I do 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 or	14. I do herei								